

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

ADDRESS (number and street) 1 ENERGY PLACE
 Check if different than previously reported. (ACC)
PENSACOLA FL 32520

2. **FEC IDENTIFICATION NUMBER** C00120519
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 10 01 2007 through 10 31 2007

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 WILLIAM GOLAN BUCK

Signature of Treasurer Electronically Filed by WILLIAM GOLAN BUCK Date 12 06 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <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>	Y	Y	Y	Y	2	0	0	7		21719.98
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	31046.88									
(c) Total Receipts (from Line 19)	10377.07	47356.98								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	41423.95	69076.96								
7. Total Disbursements (from Line 31)	5250.00	32903.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	36173.95	36173.95								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

Write or Type Committee Name

RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	8077.02	24448.26
(ii) Unitemized	2254.08	22523.21
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10331.10	46971.47
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10331.10	46971.47
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	45.97	385.51
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10377.07	47356.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10377.07	47356.98

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	7500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	5250.00	25403.01
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5250.00	32903.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5250.00	32903.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	10331.10	46971.47
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10331.10	46971.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) Katherine A Ames		Date of Receipt
	Mailing Address 3066 Lianna Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 02 / 2007
	City	State	Zip Code
	Pensacola	FL	32505
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14331
Name of Employer Gulf Power		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 343.13	<input type="text"/> 38.55
			monthly payroll deduction

B.	Full Name (Last, First, Middle Initial) Katherine A Ames		Date of Receipt
	Mailing Address 3066 Lianna Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 29 / 2007
	City	State	Zip Code
	Pensacola	FL	32505
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14501
Name of Employer Gulf Power		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 381.68	<input type="text"/> 38.55
			monthly payroll deduction

C.	Full Name (Last, First, Middle Initial) WILLIAM W AYCOCK		Date of Receipt
	Mailing Address PANAMA CITY DIST OFFICE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 02 / 2007
	City	State	Zip Code
	PANAMA CITY	FL	32405
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14334
Name of Employer GULF POWER COMPANY		Occupation ENGINEERING & CONSTRUCTION MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 418.12	<input type="text"/> 46.78
			monthly payroll deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 123.88
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) WILLIAM W AYCOCK		Date of Receipt
	Mailing Address PANAMA CITY DIST OFFICE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	PANAMA CITY	FL	32405
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14504
Name of Employer GULF POWER COMPANY		Occupation ENGINEERING & CONSTRUCTION MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 46.78
			monthly payroll deduction

B.	Full Name (Last, First, Middle Initial) Albert R Barfield		Date of Receipt
	Mailing Address 5663 Meadowlark Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Milton	FL	32570-8770
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14335
Name of Employer Gulf Power		Occupation Market Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 43.68
			monthly payroll deduction

C.	Full Name (Last, First, Middle Initial) Albert R Barfield		Date of Receipt
	Mailing Address 5663 Meadowlark Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Milton	FL	32570-8770
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14505
Name of Employer Gulf Power		Occupation Market Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 43.68
			monthly payroll deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 134.14
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) RICHARD E BROCK		Date of Receipt
	Mailing Address 314 AEGEAN 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 1 0 / 0 2 / 2 0 0 7
	City	State	Zip Code
	MILTON	FL	32583-3300
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14344
Name of Employer GULF POWER		Occupation FIN ANALYST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 241.47	<input type="text"/> 26.83
monthly payroll deduction			

B.	Full Name (Last, First, Middle Initial) RICHARD E BROCK		Date of Receipt
	Mailing Address 314 AEGEAN 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 1 0 / 2 9 / 2 0 0 7
	City	State	Zip Code
	MILTON	FL	32583-3300
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14514
Name of Employer GULF POWER		Occupation FIN ANALYST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 268.30	<input type="text"/> 26.83
monthly payroll deduction			

C.	Full Name (Last, First, Middle Initial) DONALD R BRYANT		Date of Receipt
	Mailing Address 1014 WINDCHIME 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 1 0 / 0 2 / 2 0 0 7
	City	State	Zip Code
	PENSACOLA	FL	32503
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14345
Name of Employer GULF POWER		Occupation TEAM LEADER/CRIST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 289.93	<input type="text"/> 32.37
monthly payroll deduction			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 86.03
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 50
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) DONALD R BRYANT	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 1014 WINDCHIME WAY	Transaction ID: SA11AI.14515
	City State Zip Code PENSACOLA FL 32503	Amount of Each Receipt this Period 32.37
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
Name of Employer GULF POWER	Occupation TEAM LEADER/CRIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.30	

B.	Full Name (Last, First, Middle Initial) WILLIAM GOLAN BUCK	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 2356 Queens Ferry Ln	Transaction ID: SA11AI.14346
	City State Zip Code Cantonment FL 32533	Amount of Each Receipt this Period 33.74
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
Name of Employer GULF POWER	Occupation Financial Planning Supv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 298.42	

C.	Full Name (Last, First, Middle Initial) WILLIAM GOLAN BUCK	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 2356 Queens Ferry Ln	Transaction ID: SA11AI.14516
	City State Zip Code Cantonment FL 32533	Amount of Each Receipt this Period 33.74
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
Name of Employer GULF POWER	Occupation Financial Planning Supv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.16	

SUBTOTAL of Receipts This Page (optional)	▶	99.85
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) JAMES D BURRIS	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 6024 CURTIS RD	Transaction ID: SA11AI.14348
	City PACE State FL Zip Code 32571-9790	Amount of Each Receipt this Period 42.49
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER Occupation SUPERVISOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 378.99	

B.	Full Name (Last, First, Middle Initial) JAMES D BURRIS	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 6024 CURTIS RD	Transaction ID: SA11AI.14518
	City PACE State FL Zip Code 32571-9790	Amount of Each Receipt this Period 42.49
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER Occupation SUPERVISOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 421.48	

C.	Full Name (Last, First, Middle Initial) JOHN W CARRELL	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 6216 KIRSTEN DR	Transaction ID: SA11AI.14350
	City PENSACOLA State FL Zip Code 32504	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER Occupation ENERGY CONSULTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 360.00	

SUBTOTAL of Receipts This Page (optional)	124.98
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial)
JOHN W CARRELL

Mailing Address 6216 KIRSTEN DR

City PENSACOLA State FL Zip Code 32504

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

Name of Employer GULF POWER Occupation ENERGY CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2007

Transaction ID: SA11AI.14520

Amount of Each Receipt this Period 40.00

monthly payroll deduction

B.

Full Name (Last, First, Middle Initial)
JAMES L CARTER

Mailing Address 1436 PLAYERS CLUB CIRCLE

City GULF BREEZE State FL Zip Code 32563-3522

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

Name of Employer GULF POWER Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2007

Transaction ID: SA11AI.14352

Amount of Each Receipt this Period 25.00

monthly payroll deduction

C.

Full Name (Last, First, Middle Initial)
JAMES L CARTER

Mailing Address 1436 PLAYERS CLUB CIRCLE

City GULF BREEZE State FL Zip Code 32563-3522

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

Name of Employer GULF POWER Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2007

Transaction ID: SA11AI.14522

Amount of Each Receipt this Period 25.00

monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) DANIEL CHILDS	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 877 W 9 1/2 MILE ROAD	Transaction ID: SA11AI.14489
	City State Zip Code PENSACOLA FL 32534	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation SOUTHERN COMPANY SERVICES BUSINESS ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) DANIEL CHILDS	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 877 W 9 1/2 MILE ROAD	Transaction ID: SA11AI.14653
	City State Zip Code PENSACOLA FL 32534	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation SOUTHERN COMPANY SERVICES BUSINESS ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) ERNEST C CONNOR, JR	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 201 POINCIANA DR	Transaction ID: SA11AI.14353
	City State Zip Code GULF BREEZE FL 32561-4347	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER TEAM LEADER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) ERNEST C CONNOR, JR	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 201 POINCIANA DR	Transaction ID: SA11AI.14523
	City State Zip Code GULF BREEZE FL 32561-4347	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER TEAM LEADER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) KEITH J CUEVAS	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 2865 GREYSTONE DR	Transaction ID: SA11AI.14356
	City State Zip Code PACE FL 32571	Amount of Each Receipt this Period 80.78
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER COMPANY PLANT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 721.02	

C.	Full Name (Last, First, Middle Initial) KEITH J CUEVAS	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 2865 GREYSTONE DR	Transaction ID: SA11AI.14526
	City State Zip Code PACE FL 32571	Amount of Each Receipt this Period 80.78
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER COMPANY PLANT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 801.80	

SUBTOTAL of Receipts This Page (optional)	▶	261.56
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 14 / 50
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A. Full Name (Last, First, Middle Initial)
AMY LYNN DANIEL

Mailing Address 4304 GRANDPOINTE PLACE

City PENSACOLA State FL Zip Code 32514-7840

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

Name of Employer GULF POWER Occupation ACCT ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.30

Date of Receipt 10 / 02 / 2007
Transaction ID: SA11AI.14357
 Amount of Each Receipt this Period 44.86
 monthly payroll deduction

B. Full Name (Last, First, Middle Initial)
AMY LYNN DANIEL

Mailing Address 4304 GRANDPOINTE PLACE

City PENSACOLA State FL Zip Code 32514-7840

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

Name of Employer GULF POWER Occupation ACCT ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 446.16

Date of Receipt 10 / 29 / 2007
Transaction ID: SA11AI.14527
 Amount of Each Receipt this Period 44.86
 monthly payroll deduction

C. Full Name (Last, First, Middle Initial)
ROBERT P DOBSON

Mailing Address 248 BOB SKIE RD

City DEFUNIAK SPRINGS State FL Zip Code 32435

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

Name of Employer GULF POWER Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 02 / 2007
Transaction ID: SA11AI.14359
 Amount of Each Receipt this Period 35.00
 monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 124.72

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) ROBERT P DOBSON	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 248 BOB SKIE RD	Transaction ID: SA11AI.14529
	City State Zip Code DEFUNIAK SPRINGS FL 32435	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Sybelle M Fitzgerald	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 2266 Stallion Road	Transaction ID: SA11AI.14366
	City State Zip Code Cantonment FL 32533	Amount of Each Receipt this Period 37.49
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation Gulf Power Engineer SR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.15	

C.	Full Name (Last, First, Middle Initial) Sybelle M Fitzgerald	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 2266 Stallion Road	Transaction ID: SA11AI.14535
	City State Zip Code Cantonment FL 32533	Amount of Each Receipt this Period 37.49
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation Gulf Power Engineer SR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.64	

SUBTOTAL of Receipts This Page (optional)	▶	109.98
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) JOHN FLOYD	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 105 HIGHPOINT DR	Transaction ID: SA11AI.14368
	City State Zip Code GULF BREEZE FL 32561	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER ECONOMIC EVAL TEAM LEADER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) JOHN FLOYD	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 105 HIGHPOINT DR	Transaction ID: SA11AI.14536
	City State Zip Code GULF BREEZE FL 32561	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER ECONOMIC EVAL TEAM LEADER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) EDWARD E GRAYSON	Date of Receipt MM / DD / YYYY 10 / 15 / 2007
	Mailing Address 591 E ROMANA ST	Transaction ID: SA11AI.14663
	City State Zip Code PENSACOLA FL 32502	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER TALENT MANAGER COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) RONALD F GRISSOM		Date of Receipt
	Mailing Address 154 HOMEWOOD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	City	State	Zip Code
	FT WALTON BEACH	FL	32548-6339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14377
Name of Employer GULF POWER		Occupation SUPERVISOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 382.46	<input type="text"/> 42.70
			monthly payroll deduction

B.	Full Name (Last, First, Middle Initial) RONALD F GRISSOM		Date of Receipt
	Mailing Address 154 HOMEWOOD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 9 / 2 0 0 7
	City	State	Zip Code
	FT WALTON BEACH	FL	32548-6339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14542
Name of Employer GULF POWER		Occupation SUPERVISOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.16	<input type="text"/> 42.70
			monthly payroll deduction

C.	Full Name (Last, First, Middle Initial) RAYMOND W GROVE		Date of Receipt
	Mailing Address 1407 EAST BLOUNT ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	City	State	Zip Code
	PENSACOLA	FL	32503-5619
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14491
Name of Employer SOUTHERN COMPANY SERVICES		Occupation SUPERVISOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 206.07	<input type="text"/> 23.07
			monthly payroll deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 108.47
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 50

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial)

RAYMOND W GROVE

Mailing Address 1407 EAST BLOUNT ST

City State Zip Code
PENSACOLA FL 32503-5619

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

Name of Employer Occupation
SOUTHERN COMPANY SERVICES SUPERVISOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 229.14

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14655

Amount of Each Receipt this Period

23.07

monthly payroll deduction

B.

Full Name (Last, First, Middle Initial)

ROBERT S HASKEW

Mailing Address 2866 H HARRISON AVE

City State Zip Code
PANAMA CITY FL 32405

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

Name of Employer Occupation
GULF POWER GROUP LEADER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 409.23

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.14378

Amount of Each Receipt this Period

45.47

monthly payroll deduction

C.

Full Name (Last, First, Middle Initial)

ROBERT S HASKEW

Mailing Address 2866 H HARRISON AVE

City State Zip Code
PANAMA CITY FL 32405

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

Name of Employer Occupation
GULF POWER GROUP LEADER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 454.70

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14543

Amount of Each Receipt this Period

45.47

monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ▶

114.01

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) BRIAN E HEINFELD	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	Mailing Address 701 RADCLIFF AVE	Transaction ID: SA11AI.14380
	City LYNN HAVEN State FL Zip Code 32444	Amount of Each Receipt this Period 53.97
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER COMPANY Occupation PLANT MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.35	

B.	Full Name (Last, First, Middle Initial) BRIAN E HEINFELD	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7
	Mailing Address 701 RADCLIFF AVE	Transaction ID: SA11AI.14545
	City LYNN HAVEN State FL Zip Code 32444	Amount of Each Receipt this Period 53.97
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER COMPANY Occupation PLANT MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 534.32	

C.	Full Name (Last, First, Middle Initial) JOHN L HUTCHINSON	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	Mailing Address 4750 BAYWIND DR	Transaction ID: SA11AI.14384
	City PENSACOLA State FL Zip Code 32514-7814	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER Occupation MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	132.94
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 50

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial)

JOHN L HUTCHINSON

Mailing Address 4750 BAYWIND DR

City

PENSACOLA

State

FL

Zip Code

32514-7814

FEC ID number of contributing federal political committee.

C

Name of Employer
GULF POWER

Occupation
MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
10 / 29 / 2007

Transaction ID: SA11AI.14549

Amount of Each Receipt this Period

25.00

monthly payroll deduction

B.

Full Name (Last, First, Middle Initial)

SCOTT W JACKSON

Mailing Address 2823 WAVA AVENUE

City

NICEVILLE

State

FL

Zip Code

32578-1718

FEC ID number of contributing federal political committee.

C

Name of Employer
GULF POWER

Occupation
ENERGY CONSULTANT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
10 / 02 / 2007

Transaction ID: SA11AI.14386

Amount of Each Receipt this Period

25.00

monthly payroll deduction

C.

Full Name (Last, First, Middle Initial)

SCOTT W JACKSON

Mailing Address 2823 WAVA AVENUE

City

NICEVILLE

State

FL

Zip Code

32578-1718

FEC ID number of contributing federal political committee.

C

Name of Employer
GULF POWER

Occupation
ENERGY CONSULTANT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
10 / 29 / 2007

Transaction ID: SA11AI.14551

Amount of Each Receipt this Period

25.00

monthly payroll deduction

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 50
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) PAUL B JACOB		Date of Receipt
	Mailing Address 1322 Quiet Cove Ct		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Gulf Breeze	FL	32563
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GULF POWER		Occupation VP	Transaction ID: SA11AI.14664
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="180.94"/>
		<input type="text" value="1768.48"/>	monthly payroll deduction

B.	Full Name (Last, First, Middle Initial) J THOMAS KILGORE, JR		Date of Receipt
	Mailing Address 1820 EAST LA RUA ST		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	PENSACOLA	FL	32501
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GULF POWER		Occupation MANAGER	Transaction ID: SA11AI.14392
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="71.31"/>
		<input type="text" value="636.05"/>	monthly payroll deduction

C.	Full Name (Last, First, Middle Initial) J THOMAS KILGORE, JR		Date of Receipt
	Mailing Address 1820 EAST LA RUA ST		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	PENSACOLA	FL	32501
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GULF POWER		Occupation MANAGER	Transaction ID: SA11AI.14557
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="71.31"/>
		<input type="text" value="707.36"/>	monthly payroll deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="323.56"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 50		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) CLIFF J KRUT	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 3997 BUTTONBUSH DR	Transaction ID: SA11AI.14393
	City State Zip Code MILTON FL 32583	Amount of Each Receipt this Period 30.16
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER COMPANY ECONOMIC DEVELOPMENT REP I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.58	

B.	Full Name (Last, First, Middle Initial) CLIFF J KRUT	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 3997 BUTTONBUSH DR	Transaction ID: SA11AI.14558
	City State Zip Code MILTON FL 32583	Amount of Each Receipt this Period 30.16
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER COMPANY ECONOMIC DEVELOPMENT REP I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 298.74	

C.	Full Name (Last, First, Middle Initial) JAMES L KUBIK	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 1167 SAWGRASS DR	Transaction ID: SA11AI.14394
	City State Zip Code GULF BREEZE FL 32561	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER MARKETING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	85.32
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A. Full Name (Last, First, Middle Initial)
JAMES L KUBIK

Mailing Address 1167 SAWGRASS DR

City State Zip Code
GULF BREEZE FL 32561

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

Name of Employer Occupation
GULF POWER MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14559

Amount of Each Receipt this Period
25.00

monthly payroll deduction

B. Full Name (Last, First, Middle Initial)
RONNIE R LABRATO

Mailing Address 549 MILESTONE BLVD

City State Zip Code
CANTONMENT FL 32533-6552

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

Name of Employer Occupation
GULF POWER VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1731.82

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

Transaction ID: SA11AI.14396

Amount of Each Receipt this Period
194.68

monthly payroll deduction

C. Full Name (Last, First, Middle Initial)
RONNIE R LABRATO

Mailing Address 549 MILESTONE BLVD

City State Zip Code
CANTONMENT FL 32533-6552

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

Name of Employer Occupation
GULF POWER VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1926.50

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14560

Amount of Each Receipt this Period
194.68

monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► **414.36**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) ROBERT G LIVINGSTON	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	Mailing Address 2470 PALE TIGER CT	Transaction ID: SA11AI.14401
	City State Zip Code TALLAHASSEE FL 32308-7015	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER MANGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

B.	Full Name (Last, First, Middle Initial) ROBERT G LIVINGSTON	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7
	Mailing Address 2470 PALE TIGER CT	Transaction ID: SA11AI.14565
	City State Zip Code TALLAHASSEE FL 32308-7015	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER MANGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) VICKI L MACK	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	Mailing Address 1731 9 1/2 MILE RD	Transaction ID: SA11AI.14492
	City State Zip Code CANTONMENT FL 32533	Amount of Each Receipt this Period 30.11
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation SOUTHERN COMPANY SERVICES BUDGET ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.98	

SUBTOTAL of Receipts This Page (optional)	150.11
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) VICKIL MACK		Date of Receipt
	Mailing Address 1731 9 1/2 MILE RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	CANTONMENT	FL	32533
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14656
Name of Employer SOUTHERN COMPANY SERVICES		Occupation BUDGET ANALYST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 283.09	<input type="text"/> 30.11
monthly payroll deduction			

B.	Full Name (Last, First, Middle Initial) RICHARD MANDES, Jr.		Date of Receipt
	Mailing Address 4432 SOUNDSIDE DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	GULF BREEZE	FL	32563
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14403
Name of Employer GULF POWER		Occupation MGR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1203.98	<input type="text"/> 135.26
monthly payroll deduction			

C.	Full Name (Last, First, Middle Initial) RICHARD MANDES, Jr.		Date of Receipt
	Mailing Address 4432 SOUNDSIDE DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	GULF BREEZE	FL	32563
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14567
Name of Employer GULF POWER		Occupation MGR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1339.24	<input type="text"/> 135.26
monthly payroll deduction			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 300.63
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial)
JIMMY F MANNING

Mailing Address 3265 COPPER RIDGE CIRCLE

City State Zip Code
CANTONMENT FL 32533-6509

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

Name of Employer Occupation
GULF POWER MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

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

Transaction ID: SA11AI.14404

Amount of Each Receipt this Period
30.00

monthly payroll deduction

B.

Full Name (Last, First, Middle Initial)
JIMMY F MANNING

Mailing Address 3265 COPPER RIDGE CIRCLE

City State Zip Code
CANTONMENT FL 32533-6509

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

Name of Employer Occupation
GULF POWER MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14568

Amount of Each Receipt this Period
30.00

monthly payroll deduction

C.

Full Name (Last, First, Middle Initial)
RICHARD M MARKEY

Mailing Address 2109 ST ANDREWS DR

City State Zip Code
CANTONMENT FL 32533

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

Name of Employer Occupation
GULF POWER GEOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 382.89

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

Transaction ID: SA11AI.14406

Amount of Each Receipt this Period
42.91

monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► **102.91**

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

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

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

FOR LINE NUMBER: PAGE 27 / 50
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A. Full Name (Last, First, Middle Initial)
RICHARD M MARKEY

Mailing Address 2109 ST ANDREWS DR

City State Zip Code
CANTONMENT FL 32533

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

Name of Employer Occupation
GULF POWER GEOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.80

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14570

Amount of Each Receipt this Period
42.91

monthly payroll deduction

B. Full Name (Last, First, Middle Initial)
RHONDA J MARTIN

Mailing Address 8301 E HWY 90

City State Zip Code
MILTON FL 32583

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

Name of Employer Occupation
GULF POWER SUPERVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 203.70

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14572

Amount of Each Receipt this Period
20.56

monthly payroll deduction

C. Full Name (Last, First, Middle Initial)
RICKY M MARTIN

Mailing Address 1236 COURT AVENUE

City State Zip Code
CHIPLEY FL 32428

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

Name of Employer Occupation
GULF POWER MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

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

Transaction ID: SA11AI.14409

Amount of Each Receipt this Period
25.00

monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► **88.47**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial) RICKY M MARTIN		Date of Receipt MM / DD / YYYY 10 / 29 / 2007
Mailing Address 1236 COURT AVENUE		Transaction ID: SA11AI.14573
City CHIPLEY	State FL	Zip Code 32428
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer GULF POWER	Occupation MANAGER	monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) MARION F MAYO		Date of Receipt MM / DD / YYYY 10 / 02 / 2007
Mailing Address ONE ENERGY PLACE		Transaction ID: SA11AI.14410
City PENSACOLA	State FL	Zip Code 32520
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.09
Name of Employer GULF POWER SMITH PLANT	Occupation TEAM LEADER CONTROL ROOM	monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 347.89	

C.

Full Name (Last, First, Middle Initial) MARION F MAYO		Date of Receipt MM / DD / YYYY 10 / 29 / 2007
Mailing Address ONE ENERGY PLACE		Transaction ID: SA11AI.14574
City PENSACOLA	State FL	Zip Code 32520
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.09
Name of Employer GULF POWER SMITH PLANT	Occupation TEAM LEADER CONTROL ROOM	monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 386.98	

SUBTOTAL of Receipts This Page (optional)	103.18
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 50
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) ALAN G MCDANIEL		Date of Receipt
	Mailing Address 2391 INVERNESS DR		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	PENSACOLA	FL	32503-5049
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14413
Name of Employer GULF POWER		Occupation MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="51.69"/>
		<input type="text" value="465.21"/>	monthly payroll deduction

B.	Full Name (Last, First, Middle Initial) ALAN G MCDANIEL		Date of Receipt
	Mailing Address 2391 INVERNESS DR		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	PENSACOLA	FL	32503-5049
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14577
Name of Employer GULF POWER		Occupation MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="51.69"/>
		<input type="text" value="516.90"/>	monthly payroll deduction

C.	Full Name (Last, First, Middle Initial) KIMBERLY E MCDANIEL		Date of Receipt
	Mailing Address 5655 BEALE FORD RD LOT 75		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	MILTON	FL	32571-9502
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14578
Name of Employer GULF POWER		Occupation SUPERVISOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.88"/>
		<input type="text" value="207.26"/>	monthly payroll deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="124.26"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial) KAREN L MCLENDON		Date of Receipt MM / DD / YYYY 10 / 02 / 2007
Mailing Address 6649 GREENWELL ST		Transaction ID: SA11AI.14417
City PENSACOLA	State FL	Zip Code 32526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.46
Name of Employer GULF POWER COMPANY	Occupation TRAINING ANALYST I	monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.76	

B.

Full Name (Last, First, Middle Initial) KAREN L MCLENDON		Date of Receipt MM / DD / YYYY 10 / 02 / 2007
Mailing Address 6649 GREENWELL ST		Transaction ID: SA11AI.14418
City PENSACOLA	State FL	Zip Code 32526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer GULF POWER COMPANY	Occupation TRAINING ANALYST I	monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.76	

C.

Full Name (Last, First, Middle Initial) KAREN L MCLENDON		Date of Receipt MM / DD / YYYY 10 / 29 / 2007
Mailing Address 6649 GREENWELL ST		Transaction ID: SA11AI.14581
City PENSACOLA	State FL	Zip Code 32526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.26
Name of Employer GULF POWER COMPANY	Occupation TRAINING ANALYST I	monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.02	

SUBTOTAL of Receipts This Page (optional)	▶	66.72
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial)
WALTER D MULLINS, JR

Mailing Address 11557 SORENTO RD

City State Zip Code
PENSACOLA FL 32507-8617

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

Name of Employer Occupation
GULF POWER MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1062.84

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

Transaction ID: SA11AI.14428

Amount of Each Receipt this Period
118.66

monthly payroll deduction

B.

Full Name (Last, First, Middle Initial)
WALTER D MULLINS, JR

Mailing Address 11557 SORENTO RD

City State Zip Code
PENSACOLA FL 32507-8617

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

Name of Employer Occupation
GULF POWER MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1181.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14592

Amount of Each Receipt this Period
118.66

monthly payroll deduction

C.

Full Name (Last, First, Middle Initial)
WALTER D MULLINS, JR

Mailing Address 11557 SORENTO RD

City State Zip Code
PENSACOLA FL 32507-8617

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

Name of Employer Occupation
GULF POWER MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2861.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14666

Amount of Each Receipt this Period
1680.00

one time contribution

SUBTOTAL of Receipts This Page (optional) ► **1917.32**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A. Full Name (Last, First, Middle Initial)
MARGARET D NEYMAN

Mailing Address 102 HIGHPOINT DR

City State Zip Code
GULF BREEZE FL 32561-4016

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

Name of Employer Occupation
GULF POWER MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 857.97

Date of Receipt: 10 / 02 / 2007
Transaction ID: SA11AI.14430
Amount of Each Receipt this Period: 96.39
monthly payroll deduction

B. Full Name (Last, First, Middle Initial)
MARGARET D NEYMAN

Mailing Address 102 HIGHPOINT DR

City State Zip Code
GULF BREEZE FL 32561-4016

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

Name of Employer Occupation
GULF POWER MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 954.36

Date of Receipt: 10 / 29 / 2007
Transaction ID: SA11AI.14594
Amount of Each Receipt this Period: 96.39
monthly payroll deduction

C. Full Name (Last, First, Middle Initial)
Gordon A Paulus

Mailing Address 1160 Great Oaks Court

City State Zip Code
Gulf Breeze FL 32563

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

Name of Employer Occupation
Gulf Power Communications specialist I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.08

Date of Receipt: 10 / 02 / 2007
Transaction ID: SA11AI.14435
Amount of Each Receipt this Period: 25.06
monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► **217.84**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial)
Gordon A Paulus

Mailing Address 1160 Great Oaks Court

City State Zip Code
Gulf Breeze FL 32563

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

Name of Employer Occupation
Gulf Power Communications specialist I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.14

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14599

Amount of Each Receipt this Period
25.06

monthly payroll deduction

B.

Full Name (Last, First, Middle Initial)
WILLIAM F POPE

Mailing Address 3030 E KINGSFIELD RD

City State Zip Code
PENSACOLA FL 32514-9737

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

Name of Employer Occupation
GULF POWER PLANNING COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 632.32

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

Transaction ID: SA11AI.14438

Amount of Each Receipt this Period
70.58

monthly payroll deduction

C.

Full Name (Last, First, Middle Initial)
WILLIAM F POPE

Mailing Address 3030 E KINGSFIELD RD

City State Zip Code
PENSACOLA FL 32514-9737

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

Name of Employer Occupation
GULF POWER PLANNING COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 702.90

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14602

Amount of Each Receipt this Period
70.58

monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► **166.22**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 50
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) CARL A PUNYKO	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	Mailing Address 4154 N CAMBRIDGE WAY	Transaction ID: SA11AI.14440
	City PACE State FL Zip Code 32571	Amount of Each Receipt this Period 101.58
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER Occupation COORDINATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 902.72	

B.	Full Name (Last, First, Middle Initial) CARL A PUNYKO	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7
	Mailing Address 4154 N CAMBRIDGE WAY	Transaction ID: SA11AI.14604
	City PACE State FL Zip Code 32571	Amount of Each Receipt this Period 101.58
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER Occupation COORDINATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1004.30	

C.	Full Name (Last, First, Middle Initial) ROBIN A PUNYKO	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	Mailing Address 4154 N CAMBRIDGE WAY	Transaction ID: SA11AI.14441
	City PACE State FL Zip Code 32571	Amount of Each Receipt this Period 22.55
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER Occupation ENERGY CONSULTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.15	

SUBTOTAL of Receipts This Page (optional)	▶	225.71
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 35 / 50
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A. Full Name (Last, First, Middle Initial)
ROBIN A PUNYKO

Mailing Address 4154 N CAMBRIDGE WAY

City PACE State FL Zip Code 32571

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

Name of Employer GULF POWER Occupation ENERGY CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 223.70

Date of Receipt 10 / 29 / 2007
Transaction ID: SA11AI.14605
 Amount of Each Receipt this Period 22.55
 monthly payroll deduction

B. Full Name (Last, First, Middle Initial)
SUSAN DANIEL RITENOUR

Mailing Address 4241 BRIGHTON DR

City PENSACOLA State FL Zip Code 32504-4928

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

Name of Employer GULF POWER Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 02 / 2007
Transaction ID: SA11AI.14446
 Amount of Each Receipt this Period 50.00
 monthly payroll deduction

C. Full Name (Last, First, Middle Initial)
SUSAN DANIEL RITENOUR

Mailing Address 4241 BRIGHTON DR

City PENSACOLA State FL Zip Code 32504-4928

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

Name of Employer GULF POWER Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2007
Transaction ID: SA11AI.14610
 Amount of Each Receipt this Period 50.00
 monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 122.55

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 50
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) PATRICK JOHN RYAN		Date of Receipt
	Mailing Address 836 PLANTATION WAY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	City	State	Zip Code
	PANAMA CITY	FL	32404
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14451
Name of Employer GULF POWER		Occupation MARKET SEGMENT SPECIALIST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 239.39	<input type="text"/> 26.95
			monthly payroll deduction

B.	Full Name (Last, First, Middle Initial) PATRICK JOHN RYAN		Date of Receipt
	Mailing Address 836 PLANTATION WAY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 9 / 2 0 0 7
	City	State	Zip Code
	PANAMA CITY	FL	32404
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14615
Name of Employer GULF POWER		Occupation MARKET SEGMENT SPECIALIST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.34	<input type="text"/> 26.95
			monthly payroll deduction

C.	Full Name (Last, First, Middle Initial) JOHN T SCARBROUGH, JR		Date of Receipt
	Mailing Address 1680 COLLEGE PKWY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	City	State	Zip Code
	GULF BREEZE	FL	32563
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14454
Name of Employer GULF POWER		Occupation MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 881.90	<input type="text"/> 98.46
			monthly payroll deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 152.36
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) JOHN T SCARBROUGH, JR	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7
	Mailing Address 1680 COLLEGE PKWY	Transaction ID: SA11AI.14618
	City State Zip Code GULF BREEZE FL 32563	Amount of Each Receipt this Period 89.46
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 980.36	

B.	Full Name (Last, First, Middle Initial) SANDRA F SIMS	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7
	Mailing Address 4018 BOND CIR	Transaction ID: SA11AI.14460
	City State Zip Code NICEVILLE FL 32578	Amount of Each Receipt this Period 88.50
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER ASSISTANT TO VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 787.76	

C.	Full Name (Last, First, Middle Initial) SANDRA F SIMS	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7
	Mailing Address 4018 BOND CIR	Transaction ID: SA11AI.14624
	City State Zip Code NICEVILLE FL 32578	Amount of Each Receipt this Period 88.50
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER ASSISTANT TO VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 876.26	

SUBTOTAL of Receipts This Page (optional)	275.46
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) GREGORY L SMITH		Date of Receipt
	Mailing Address 74 NORWICH CIR		<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
	NICEVILLE	FL	32578
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14461
Name of Employer GULF POWER		Occupation SALES REP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 225.00	monthly payroll deduction

B.	Full Name (Last, First, Middle Initial) GREGORY L SMITH		Date of Receipt
	Mailing Address 74 NORWICH CIR		<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
	NICEVILLE	FL	32578
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14625
Name of Employer GULF POWER		Occupation SALES REP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 250.00	monthly payroll deduction

C.	Full Name (Last, First, Middle Initial) THEODORE S SPANGENBERG, JR		Date of Receipt
	Mailing Address 711 DRIFTWOOD 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
	City	State	Zip Code
	LYNN HAVEN	FL	32444
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.14463
Name of Employer GULF POWER		Occupation MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 450.00	monthly payroll deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 100.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 39 / 50
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A. Full Name (Last, First, Middle Initial)
THEODORE S SPANGENBERG, JR

Mailing Address 711 DRIFTWOOD DR

City State Zip Code
LYNN HAVEN FL 32444

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

Name of Employer Occupation
GULF POWER MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14627

Amount of Each Receipt this Period
50.00

monthly payroll deduction

B. Full Name (Last, First, Middle Initial)
SUSAN NOLEN STORY

Mailing Address 714 PEAKE'S POINT DR

City State Zip Code
GULF BREEZE FL 32561

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

Name of Employer Occupation
GULF POWER PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

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

Transaction ID: SA11AI.14466

Amount of Each Receipt this Period
300.00

monthly payroll deduction

C. Full Name (Last, First, Middle Initial)
SUSAN NOLEN STORY

Mailing Address 714 PEAKE'S POINT DR

City State Zip Code
GULF BREEZE FL 32561

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

Name of Employer Occupation
GULF POWER PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14630

Amount of Each Receipt this Period
300.00

monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) KENNETH M TRUMP	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 6887 YORKWOOD ST	Transaction ID: SA11AI.14474
	City NAVARRE State FL Zip Code 32566	Amount of Each Receipt this Period 44.88
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER Occupation SUPERVISOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 403.92	

B.	Full Name (Last, First, Middle Initial) KENNETH M TRUMP	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 6887 YORKWOOD ST	Transaction ID: SA11AI.14638
	City NAVARRE State FL Zip Code 32566	Amount of Each Receipt this Period 44.88
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER Occupation SUPERVISOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 448.80	

C.	Full Name (Last, First, Middle Initial) JAMES O VICK	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 1189 GULF BREEZE PKWY	Transaction ID: SA11AI.14476
	City GULF BREEZE State FL Zip Code 32561-4857	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer GULF POWER Occupation MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 450.00	

SUBTOTAL of Receipts This Page (optional)	139.76
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial) JAMES O VICK		Date of Receipt MM / DD / YYYY 10 / 29 / 2007
Mailing Address 1189 GULF BREEZE PKWY		Transaction ID: SA11AI.14640
City GULF BREEZE	State FL	Zip Code 32561-4857
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer GULF POWER	Occupation MANAGER	monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) JAY B WESTON		Date of Receipt MM / DD / YYYY 10 / 02 / 2007
Mailing Address 5355 STAFFORD CIR		Transaction ID: SA11AI.14482
City PACE	State FL	Zip Code 32571-8638
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.64
Name of Employer GULF POWER	Occupation GROUP LEADER	monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.76	

C.

Full Name (Last, First, Middle Initial) JAY B WESTON		Date of Receipt MM / DD / YYYY 10 / 29 / 2007
Mailing Address 5355 STAFFORD CIR		Transaction ID: SA11AI.14646
City PACE	State FL	Zip Code 32571-8638
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.64
Name of Employer GULF POWER	Occupation GROUP LEADER	monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.40	

SUBTOTAL of Receipts This Page (optional)	141.28
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 50
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial)
JEFFERY ALLEN WHITE

Mailing Address 107 GLADES TURN

City State Zip Code
PANAMA CITY BEACH FL 32407

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

Name of Employer Occupation
GULF POWER COMPANY DIST CONSTRUCTION SUPV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.35

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

Transaction ID: SA11AI.14483

Amount of Each Receipt this Period
40.79

monthly payroll deduction

B.

Full Name (Last, First, Middle Initial)
JEFFERY ALLEN WHITE

Mailing Address 107 GLADES TURN

City State Zip Code
PANAMA CITY BEACH FL 32407

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

Name of Employer Occupation
GULF POWER COMPANY DIST CONSTRUCTION SUPV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 406.14

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.14647

Amount of Each Receipt this Period
40.79

monthly payroll deduction

C.

Full Name (Last, First, Middle Initial)
DAVID L WILLIAMS

Mailing Address 4500 LA MIRAGE DR

City State Zip Code
PENSACOLA FL 32504-7870

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

Name of Employer Occupation
GULF POWER ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 327.19

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

Transaction ID: SA11AI.14484

Amount of Each Receipt this Period
36.53

monthly payroll deduction

SUBTOTAL of Receipts This Page (optional) ► **118.11**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 50
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) DAVID L WILLIAMS		Date of Receipt	
	Mailing Address 4500 LA MIRAGE DR		M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.14648
	PENSACOLA	FL	32504-7870	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		36.53	
Name of Employer GULF POWER		Occupation ENGINEER		monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 363.72		

B.	Full Name (Last, First, Middle Initial) CALVIN W WILSON, II		Date of Receipt	
	Mailing Address 3854 SABERTOOTH CIR		M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.14485
	GULF BREEZE	FL	32561-3520	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		46.90	
Name of Employer GULF POWER		Occupation MANAGER		monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.08		

C.	Full Name (Last, First, Middle Initial) CALVIN W WILSON, II		Date of Receipt	
	Mailing Address 3854 SABERTOOTH CIR		M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.14649
	GULF BREEZE	FL	32561-3520	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		46.90	
Name of Employer GULF POWER		Occupation MANAGER		monthly payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 466.98		

SUBTOTAL of Receipts This Page (optional)	▶	130.33
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 50
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) RONNIE E YADEN	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 11525 GULF BEACH HWY	Transaction ID: SA11AI.14487
	City State Zip Code PENSACOLA FL 32507-9139	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) RONNIE E YADEN	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 11525 GULF BEACH HWY	Transaction ID: SA11AI.14651
	City State Zip Code PENSACOLA FL 32507-9139	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) JARL T YOUNG	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 2342 ARRIVISTE WAY	Transaction ID: SA11AI.14497
	City State Zip Code PENSACOLA FL 32504	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	monthly payroll deduction
	Name of Employer Occupation GULF POWER CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 45 / 50	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial) JARL T YOUNG		Date of Receipt
Mailing Address 2342 ARRIVISTE WAY		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
City	State	Zip Code
PENSACOLA	FL	32504
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.14661
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer GULF POWER		<input type="text" value="50.00"/>
Occupation CIO		monthly payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="50.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="8077.02"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 46 / 50	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial) Gulf Power Employees Credit Union		Date of Receipt
Mailing Address 200 N Pace Blvd		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
City	State	Zip Code
Pensacola	FL	32505
FEC ID number of contributing federal political committee.		Transaction ID: SA17.14668
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="45.97"/>
Occupation		dividends
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="385.51"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="45.97"/>
TOTAL This Period (last page this line number only)	<input type="text" value="45.97"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) JEFF H ATWATER	Transaction ID: SB29.14682 Date of Disbursement 10 / 16 / 2007	
	Mailing Address PO BOX 14366		
	City NORTH PALM BEACH	State FL	Zip Code 33408
	Purpose of Disbursement POLITICAL CONTRIBUTION	Amount of Each Disbursement this Period 500.00	
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: FL District: 25		
B.	Full Name (Last, First, Middle Initial) DEBBIE BOYD	Transaction ID: SB29.14676 Date of Disbursement 10 / 05 / 2007	
	Mailing Address PO Box 95		
	City NEWBERRY	State FL	Zip Code 32669
	Purpose of Disbursement POLITICAL CONTRIBUTION	Amount of Each Disbursement this Period 250.00	
	Candidate Name	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: FL District: 11		
C.	Full Name (Last, First, Middle Initial) DEAN CANNON	Transaction ID: SB29.14678 Date of Disbursement 10 / 05 / 2007	
	Mailing Address P.O. BOX 3068		
	City ORLANDO	State FL	Zip Code 32802
	Purpose of Disbursement POLITICAL CONTRIBUTION	Amount of Each Disbursement this Period 500.00	
	Candidate Name	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: FL District: 35		

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 48 / 50

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

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) GREG EVERS	Transaction ID: SB29.14673 Date of Disbursement 10 / 05 / 2007
	Mailing Address 1054 Melton Rd	Amount of Each Disbursement this Period 500.00
	City Baker State FL Zip Code 32531	
	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: FL District: 02	

B.	Full Name (Last, First, Middle Initial) CLAY V FORD	Transaction ID: SB29.14671 Date of Disbursement 10 / 05 / 2007
	Mailing Address PO Box 13484	Amount of Each Disbursement this Period 500.00
	City Pensacola State FL Zip Code 32591	
	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: FL District: 03	

C.	Full Name (Last, First, Middle Initial) LUIS R GARCIA, Jr.	Transaction ID: SB29.14684 Date of Disbursement 10 / 05 / 2007
	Mailing Address PO Box 402684	Amount of Each Disbursement this Period 250.00
	City MIAMI BEACH State FL Zip Code 33140	
	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: FL District:	

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.	Full Name (Last, First, Middle Initial) HOUSE MAJORITY 2008	Transaction ID: SB29.14670 Date of Disbursement
	Mailing Address P O BOX 311	<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City TALLAHASSEE State FL Zip Code 32302	Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JIMMY PATRONIS	Transaction ID: SB29.14674 Date of Disbursement
	Mailing Address 8717 N LAGOON DR	<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City PANAMA CITY State FL Zip Code 32408	Amount of Each Disbursement this Period
	Purpose of Disbursement monthly payroll deduction	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	State: FL District: 06	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RAY SANSOM	Transaction ID: SB29.14672 Date of Disbursement
	Mailing Address 328 HOLLY ST	<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City DESTIN State FL Zip Code 32541	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBTUION	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	State: FL District: 04	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 50 / 50

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

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NAME OF COMMITTEE (In Full)

RESPONSIBLE GOVERNMENT COMMITTEE OF GULF POWER COMPANY EMPLOYEES INC

A.

Full Name (Last, First, Middle Initial)
ROBERT SCHENCK

Transaction ID: SB29.14675

Date of Disbursement

Mailing Address 2096 Gold Rd

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	0	7

City Spring Hill State FL Zip Code 34609

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 44

B.

Full Name (Last, First, Middle Initial)
WILLIAM WEATHERFORD

Transaction ID: SB29.14677

Date of Disbursement

Mailing Address 1646 PARKER POINT

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	0	7

City ODESSA State FL Zip Code 33556

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 61

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

5250.00
