

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
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

ADDRESS (number and street) 1900 BRANNAN ROAD
 Check if different than previously reported. (ACC)
MCDONOUGH GA 30253

2. **FEC IDENTIFICATION NUMBER** C00265546
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) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 07 2006 in the State of _____

5. Covering Period 10 19 2006 through 11 27 2006

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 JACK ROBERTS

Signature of Treasurer Electronically Filed by JACK ROBERTS Date 12 13 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		112136.32
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	57256.88									
(c) Total Receipts (from Line 19)	29845.69	61126.61								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	87102.57	173262.93								
7. Total Disbursements (from Line 31)	17206.86	103367.22								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	69895.71	69895.71								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

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	29845.69	60721.34
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	29845.69	60721.34
(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)	29845.69	60721.34
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	405.27
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	29845.69	61126.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	29845.69	61126.61

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	386.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	386.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	6500.00
24. Independent Expenditure (use Schedule E)	8921.01	11319.44
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.....	8285.85	85161.07
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))..	17206.86	103367.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	17206.86	103367.22

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	29845.69	60721.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29845.69	60721.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	386.71
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	405.27
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	-18.56

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 35
	<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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A. Full Name (Last, First, Middle Initial)
SOUTHERN STATES P.B.A

Mailing Address 1900 BRANNAN ROAD

City State Zip Code
MCDONOUGH GA 30253

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39917.95

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

Transaction ID: SA11A1.10640

Amount of Each Receipt this Period
9042.30

\$.50 PER MEMBER PER MONTH

B. Full Name (Last, First, Middle Initial)
SOUTHERN STATES P.B.A

Mailing Address 1900 BRANNAN ROAD

City State Zip Code
MCDONOUGH GA 30253

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
49945.45

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

Transaction ID: SA11A1.10641

Amount of Each Receipt this Period
10027.50

\$.50 PER MEMBER PER MONTH

C. Full Name (Last, First, Middle Initial)
SOUTHERN STATES P.B.A

Mailing Address 1900 BRANNAN ROAD

City State Zip Code
MCDONOUGH GA 30253

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10775.89

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

Transaction ID: SA11A1.10639

Amount of Each Receipt this Period
10775.89

\$.50 PER MEMBER PER MONTH

SUBTOTAL of Receipts This Page (optional)	29845.69
TOTAL This Period (last page this line number only)	29845.69

**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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Full Name (Last, First, Middle Initial) A. ASA BUCK		Transaction ID: SB29.10521 Date of Disbursement
Mailing Address 319 COUNTRY CLUB LANE		<input type="text" value="10"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City NEWPORT	State NC	Zip Code 28570
Purpose of Disbursement CONTRIBUTION	<input type="text" value="011"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District:	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) B. TRACY CARTER		Transaction ID: SB29.10533 Date of Disbursement
Mailing Address 1573 CHRIS COLE RD		<input type="text" value="10"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SANFORD	State NC	Zip Code 27330
Purpose of Disbursement CONTRIBUTION	<input type="text" value="011"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District:	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) C. CROWN PLAZA		Transaction ID: SB29.10548 Date of Disbursement
Mailing Address 851 CONGAREE ROAD		<input type="text" value="10"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City GREENEVILLE	State SC	Zip Code 29607
Purpose of Disbursement MEETING ROOM	<input type="text" value="001"/> Category/ Type	
Candidate Name RICHARD ECKSTROM		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1870.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Full Name (Last, First, Middle Initial) A. TOM DAVIES		Transaction ID: SB29.10542	
Mailing Address 380 MARY HANNA RD		Date of Disbursement 10 / 19 / 2006	
City WOODRUFF	State SC	Zip Code 29388	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTRIBUTION		011 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NC	District:		

Full Name (Last, First, Middle Initial) B. ARTUR DAVIS		Transaction ID: SB29.10644	
Mailing Address P.O. BOX 1845		Date of Disbursement 10 / 23 / 2006	
City BIRMINGHAM	State AL	Zip Code 35201	Amount of Each Disbursement this Period -1500.00
Purpose of Disbursement CHECK NOT GIVEN TO CANDIDATE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AL	District:		

Full Name (Last, First, Middle Initial) C. PHIL DOTTS		Transaction ID: SB29.10646	
Mailing Address 403 WHITE STREET		Date of Disbursement 10 / 23 / 2006	
City HUNTSVILLE	State AL	Zip Code 35801	Amount of Each Disbursement this Period -200.00
Purpose of Disbursement CHECK NOT GIVEN TO CANDIDATE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AL	District:		

SUBTOTAL of Disbursements This Page (optional)	-700.00
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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Transaction ID: SB29.10577 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address P.O. BOX 1140		Amount of Each Disbursement this Period 57.66
City MEMPHIS State TN Zip Code 38101	001 Category/ Type	
Purpose of Disbursement POSTAGE Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. MALCOLM GRAHAM		Transaction ID: SB29.10648 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 3404 CRESTA		Amount of Each Disbursement this Period -250.00
City CHARLOTTE State NC Zip Code 28269	Category/ Type	
Purpose of Disbursement CHECK LOST IN MAIL REISSUED Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District:		

Full Name (Last, First, Middle Initial) C. PAT GREEN		Transaction ID: SB29.10526 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 4536 NC HWY E		Amount of Each Disbursement this Period 500.00
City LOUISBURG State NC Zip Code 27549	011 Category/ Type	
Purpose of Disbursement CONTRIBUTION Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District:		

SUBTOTAL of Disbursements This Page (optional) ▶	307.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Full Name (Last, First, Middle Initial) A. GREENSBORO NEWS AND RECORD		Transaction ID: SB29.10627 Date of Disbursement																					
Mailing Address 200 E. MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	3	1	/	2	0	0	6														
City GREENSBORO	State NC	Zip Code 27401	Amount of Each Disbursement this Period																				
Purpose of Disbursement ADVERTISEMENT		Category/ Type	327.24																				
Candidate Name TOM JARRELL, Jr.																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. GREENSBORO NEWS AND RECORD		Transaction ID: SB29.10628 Date of Disbursement																					
Mailing Address 200 E. MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	3	1	/	2	0	0	6														
City GREENSBORO	State NC	Zip Code 27401	Amount of Each Disbursement this Period																				
Purpose of Disbursement ADVERTISEMENT		Category/ Type	327.24																				
Candidate Name STUART ALBRIGHT																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. GREENSBORO NEWS AND RECORD		Transaction ID: SB29.10650 Date of Disbursement																					
Mailing Address 200 E. MARKET ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	1	/	2	0	0	6														
City GREENSBORO	State NC	Zip Code 27401	Amount of Each Disbursement this Period																				
Purpose of Disbursement ADVERTISEMENT		Category/ Type	76.76																				
Candidate Name TOM JARRELL, Jr.																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	731.24
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)

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<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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

A. GREENSBORO NEWS AND RECORD

Full Name (Last, First, Middle Initial)

Mailing Address 200 E. MARKET ST

City GREENSBORO State NC Zip Code 27401

Purpose of Disbursement
ADVERTISEMENT

Candidate Name
STUART ALBRIGHT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.10651

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

76.76

B. HAL JORDAN CAMPAIGN

Full Name (Last, First, Middle Initial)

Mailing Address 4415 MONROE RD, STE 100

City CHARLOTTE State NC Zip Code 28205

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.10632

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

250.00

C. HIGH POINT ENTERPRISE

Full Name (Last, First, Middle Initial)

Mailing Address 210 CHURCH AVE

City HIGH POINT State NC Zip Code 27262

Purpose of Disbursement
ADVERTISEMENT

Candidate Name
TOM JARRELL, Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.10630

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

180.00

SUBTOTAL of Disbursements This Page (optional) ▶

506.76

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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Full Name (Last, First, Middle Initial) A. HIGH POINT ENTERPRISE		Transaction ID: SB29.10631 Date of Disbursement
Mailing Address 210 CHURCH AVE		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
City HIGH POINT	State NC	Zip Code 27262
Purpose of Disbursement ADVERTISEMENT	<input type="text" value="180.00"/>	
Candidate Name STUART ALBRIGHT	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. KEVIN HINES		Transaction ID: SB29.10537 Date of Disbursement
Mailing Address 4801 ROBY DR		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City ARCHDALE	State NC	Zip Code 27263
Purpose of Disbursement CONTRIBUTION	<input type="text" value="500.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC District:		

Full Name (Last, First, Middle Initial) C. JIMMY HOLLEY		Transaction ID: SB29.10544 Date of Disbursement
Mailing Address 4212 COUNTY ROAD 364		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
City ELBA	State AL	Zip Code 36323
Purpose of Disbursement CONTRIBUTION	<input type="text" value="500.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1180.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Full Name (Last, First, Middle Initial) A. RON JOHNSON		Transaction ID: SB29.10645 Date of Disbursement 10 / 23 / 2006
Mailing Address 3770 SYLACAUGA-FAYETTEVILLE HWY		Amount of Each Disbursement this Period -200.00
City SYLACAUGA State AL Zip Code 35151		
Purpose of Disbursement CHECK NOT GIVEN TO CANDIDATE	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JOHNSON CITY PRESS		Transaction ID: SB29.10716 Date of Disbursement 10 / 26 / 2006
Mailing Address P.O. BOX 1717		Amount of Each Disbursement this Period 406.23
City JOHNSON CITY State TN Zip Code 37605		
Purpose of Disbursement ADVERTISEMENT	Category/ Type 004	
Candidate Name FRED PHILLIPS		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. HAL JORDAN		Transaction ID: SB29.10647 Date of Disbursement 11 / 02 / 2006
Mailing Address 7200 BENITA DR		Amount of Each Disbursement this Period -250.00
City CHARLOTTE State NC Zip Code 28212		
Purpose of Disbursement CHECK LOST IN MAIL REISSUED	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	-43.77
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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Full Name (Last, First, Middle Initial) A. LAWRENCE COUNTY ADVOCATE		Transaction ID: SB29.10578	
Mailing Address 121 NORTH MILITARY AVE		Date of Disbursement 10 / 31 / 2006	
City LAWRENCEBURG	State TN	Zip Code 38464	Amount of Each Disbursement this Period 72.75
Purpose of Disbursement ADVERTISEMENT		004 Category/ Type	
Candidate Name TIM DICKEY			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN	District:		

Full Name (Last, First, Middle Initial) B. MALCOM GRAHAM CAMPAIGN		Transaction ID: SB29.10636	
Mailing Address 3404 CRESTA COT		Date of Disbursement 11 / 03 / 2006	
City CHARLOTTE	State NC	Zip Code 28269	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement CAMPAIGN CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) C. TROY MCDUFFIE		Transaction ID: SB29.10531	
Mailing Address P.O. BOX 41708		Date of Disbursement 10 / 19 / 2006	
City FAYETTEVILLE	State NC	Zip Code 28309	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement CONTRIBUTION		011 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NC	District:		

SUBTOTAL of Disbursements This Page (optional)	822.75
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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Full Name (Last, First, Middle Initial) A. JERRY MONETTE		Transaction ID: SB29.10523 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 4250 WILCOX RD		Amount of Each Disbursement this Period 500.00
City NEW BERN State NC Zip Code 28562	011 Category/ Type	
Purpose of Disbursement CONTRIBUTIION Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. LINDY PENDERGRASS		Transaction ID: SB29.10535 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address P.O. BOX 1154		Amount of Each Disbursement this Period 500.00
City CARRBORO State NC Zip Code 27510	011 Category/ Type	
Purpose of Disbursement CONTRIBUTION Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND		Transaction ID: SB29.10546 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 1900 BRANNAN ROAD		Amount of Each Disbursement this Period 400.00
City MCDONOUGH State GA Zip Code 30253	007 Category/ Type	
Purpose of Disbursement MEETING ROOM Candidate Name RICHARD ECKSTROM		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1400.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 16 / 35

<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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Full Name (Last, First, Middle Initial)

A. SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Mailing Address 1900 BRANNAN ROAD

City MCDONOUGH State GA Zip Code 30253

Purpose of Disbursement
MEETING ROOM

Candidate Name
RICHARD ECKSTROM

007
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.10547

Date of Disbursement

10 / 25 / 2006

Amount of Each Disbursement this Period

832.71

Full Name (Last, First, Middle Initial)

B. THE GREENVILLE SUN

Mailing Address 121 WEST SUMMER ST

City GREENVILLE State TN Zip Code 37743

Purpose of Disbursement
ADVERTISEMENT

Candidate Name
EDDIE YOKLEY

004
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.10576

Date of Disbursement

10 / 26 / 2006

Amount of Each Disbursement this Period

72.75

Full Name (Last, First, Middle Initial)

C. THE GREENVILLE SUN

Mailing Address 121 WEST SUMMER ST

City GREENVILLE State TN Zip Code 37743

Purpose of Disbursement
ADVERTISEMENT

Candidate Name
STEVE SOUTHERLAND

004
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: TN District:

Transaction ID: SB29.10715

Date of Disbursement

10 / 26 / 2006

Amount of Each Disbursement this Period

72.75

SUBTOTAL of Disbursements This Page (optional) ▶

978.21

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 17 / 35

<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)
SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND

Full Name (Last, First, Middle Initial) A. THE NEWPORT PLAIN		Transaction ID: SB29.10574 Date of Disbursement																					
Mailing Address 145 E BROADWAY		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	6		2	0	0	6														
City NEWPORT	State TN	Zip Code 37821	Amount of Each Disbursement this Period																				
Purpose of Disbursement ADVERTISEMENT		Category/ Type 004	232.50																				
Candidate Name EDDIE YOKLEY																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. PETER WHITE		Transaction ID: SB29.10539 Date of Disbursement																					
Mailing Address 60 FRANK BULLOCK RD		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	9		2	0	0	6														
City MANSON	State NC	Zip Code 27533	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	500.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: NC District:																							

Full Name (Last, First, Middle Initial) C. CAREY WINDERS		Transaction ID: SB29.10541 Date of Disbursement																					
Mailing Address 870 VAIL ROAD		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	9		2	0	0	6														
City PIKEVILLE	State NC	Zip Code 27863	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	500.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	1232.50
TOTAL This Period (last page this line number only)	▶	8285.85

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DAILY PRESS

Mailing Address
7505 WARWICK BLVD

City State Zip Code
NEWPORT NEWS VA 23607

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
JO ANN DAVIS

Calendar Year-To-Date Per Election for Office Sought 926.42

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

Amount
202.74

Transaction ID: SE24.10655
Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
DAILY PRESS

Mailing Address
7505 WARWICK BLVD

City State Zip Code
NEWPORT NEWS VA 23607

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
PHILLIP KELLAM

Calendar Year-To-Date Per Election for Office Sought 926.42

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

Amount
202.74

Transaction ID: SE24.10656
Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures 405.48

(b) SUBTOTAL of Unitemized Independent Expenditures 278.33

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DAILY PRESS

Mailing Address
7505 WARWICK BLVD

City	State	Zip Code
NEWPORT NEWS	VA	23607

Purpose of Expenditure ADVERTISEMENT	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT SCOTT

Calendar Year-To-Date Per Election for Office Sought	202.74
---	--------

Date

M M	/	D D	/	Y Y Y Y
1 0		3 1		2 0 0 6

Amount

202.74

Transaction ID: SE24.10657

Office Sought: House State: VA
 Senate District: 3
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
DAILY PRESS

Mailing Address
7505 WARWICK BLVD

City	State	Zip Code
NEWPORT NEWS	VA	23607

Purpose of Expenditure ADVERTISEMENT	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
TOM O'DONOGHUE

Calendar Year-To-Date Per Election for Office Sought	202.74
---	--------

Date

M M	/	D D	/	Y Y Y Y
1 0		3 1		2 0 0 6

Amount

202.74

Transaction ID: SE24.10661

Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	405.48
--	--------

(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
--	--------

(c) TOTAL Independent Expenditures	
---	--

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		1 3		2 0 0 6

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DAILY PRESS

Mailing Address
7505 WARWICK BLVD

City NEWPORT NEWS	State VA	Zip Code 23607
----------------------	-------------	-------------------

Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
CHARLES CARTER

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

Amount
202.74

Transaction ID: SE24.10662

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Calendar Year-To-Date Per Election
for Office Sought 202.74

Full Name (Last, First, Middle, Initial) of Payee
DAILY PRESS

Mailing Address
7505 WARWICK BLVD

City NEWPORT NEWS	State VA	Zip Code 23607
----------------------	-------------	-------------------

Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
JUDY FEDER

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

Amount
202.74

Transaction ID: SE24.10663

Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Calendar Year-To-Date Per Election
for Office Sought 202.74

(a) SUBTOTAL of Itemized Independent Expenditures	405.48
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
DAILY PRESS

Mailing Address
7505 WARWICK BLVD

City State Zip Code
NEWPORT NEWS VA 23607

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS DAVIS

Calendar Year-To-Date Per Election for Office Sought 202.74

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

Amount
202.74

Transaction ID: SE24.10666
Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
DAILY PRESS

Mailing Address
7505 WARWICK BLVD

City State Zip Code
NEWPORT NEWS VA 23607

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
JAMES WEBB

Calendar Year-To-Date Per Election for Office Sought 650.83

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

Amount
202.75

Transaction ID: SE24.10667
Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	405.49
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
MISSISSIPPI LINK

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

Mailing Address
206 WEST PEARL ST
STE 1501

Amount
250.00

City State Zip Code
JACKSON MS 39201

Transaction ID: SE24.10558
Office Sought: House State: MS
 Senate District: 2
 Presidential

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
YVONNE BROWN

Disbursement For: Primary General 2006
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
517.83

Full Name (Last, First, Middle, Initial) of Payee
RICHMOND TIMES

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

Mailing Address
300 EAST FRANKLIN ST

Amount
448.06

City State Zip Code
RICHMOND VA 23219

Transaction ID: SE24.10592
Office Sought: House State: _____
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
JO ANN DAVIS

Disbursement For: Primary General 2006
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
723.68

(a) SUBTOTAL of Itemized Independent Expenditures	698.06
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
RICHMOND TIMES

Mailing Address
300 EAST FRANKLIN ST

City RICHMOND	State VA	Zip Code 23219
------------------	-------------	-------------------

Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
PHILLIP KELLAM

Calendar Year-To-Date Per Election for Office Sought	723.68
---	--------

Date

M M 1 0	D D 3 1	Y Y Y Y 2 0 0 6
------------	------------	--------------------

Amount

448.06

Transaction ID: SE24.10594

Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
RICHMOND TIMES

Mailing Address
300 EAST FRANKLIN ST

City RICHMOND	State VA	Zip Code 23219
------------------	-------------	-------------------

Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
JAMES WEBB

Calendar Year-To-Date Per Election for Office Sought	448.08
---	--------

Date

M M 1 0	D D 3 1	Y Y Y Y 2 0 0 6
------------	------------	--------------------

Amount

448.08

Transaction ID: SE24.10601

Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	896.14
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

Date

M M 1 2	D D 1 3	Y Y Y Y 2 0 0 6
------------	------------	--------------------

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
RICHMOND TIMES

Mailing Address
300 EAST FRANKLIN ST

City State Zip Code
RICHMOND VA 23219

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT SCOTT

Calendar Year-To-Date Per Election for Office Sought 650.80

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

Amount
448.06
Transaction ID: SE24.10669

Office Sought: House State: VA
 Senate District: 3
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
RICHMOND TIMES

Mailing Address
300 EAST FRANKLIN ST

City State Zip Code
RICHMOND VA 23219

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
TOM O'DONOGHUE

Calendar Year-To-Date Per Election for Office Sought 650.80

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

Amount
448.06
Transaction ID: SE24.10670

Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	896.12
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
RICHMOND TIMES

Mailing Address
300 EAST FRANKLIN ST

City RICHMOND	State VA	Zip Code 23219
------------------	-------------	-------------------

Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
C.W. CARRICO

Calendar Year-To-Date Per Election for Office Sought	448.06
---	--------

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

Amount
448.06

Transaction ID: SE24.10671

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
RICHMOND TIMES

Mailing Address
300 EAST FRANKLIN ST

City RICHMOND	State VA	Zip Code 23219
------------------	-------------	-------------------

Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
JUDY FEDER

Calendar Year-To-Date Per Election for Office Sought	650.80
---	--------

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

Amount
448.06

Transaction ID: SE24.10672

Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	896.12
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
RICHMOND TIMES

Mailing Address
300 EAST FRANKLIN ST

City State Zip Code
RICHMOND VA 23219

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS DAVIS III

Calendar Year-To-Date Per Election for Office Sought 448.06

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

Amount
448.06

Transaction ID: SE24.10677
Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
THE BOLIVAR COMMERCIAL

Mailing Address
821 N CHRISMAN AVE

City State Zip Code
CLEVELAND MS 38732

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
YVONNE BROWN

Calendar Year-To-Date Per Election for Office Sought 267.83

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

Amount
135.00

Transaction ID: SE24.10556
Office Sought: House State: MS
 Senate District: 2
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	583.06
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
THE CLARKSDALE

Mailing Address
123 E SECOND ST

City CLARKSDALE	State MS	Zip Code 38614
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Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
YVONNE BROWN

Calendar Year-To-Date Per Election for Office Sought	904.18
---	--------

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

Amount
166.16

Transaction ID: SE24.10560

Office Sought: House State: MS
 Senate District: 2
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
THE VIRGINIAN-PILOT

Mailing Address
921 N BATTLEFIELD BLVD

City CHESAPEAKE	State VA	Zip Code 23320
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Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS DAVIS III

Calendar Year-To-Date Per Election for Office Sought	723.68
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Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Amount
275.62

Transaction ID: SE24.10681

Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	441.78
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
VICKSBURG POST

Mailing Address
1601-F N FRONTAGE ROAD

City VICKSBRUG	State MS	Zip Code 39182
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Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
YVONNE BROWN

Calendar Year-To-Date Per Election for Office Sought	738.02
---	--------

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

Amount
220.19

Transaction ID: SE24.10559

Office Sought: House State: MS
 Senate District: 2
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIA GAZETTE

Mailing Address
216 IRON-BOUND RD

City WILLIAMSBURG	State VA	Zip Code 23188
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Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
JO ANN DAVIS

Calendar Year-To-Date Per Election for Office Sought	983.90
---	--------

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

Amount
57.48

Transaction ID: SE24.10688

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	277.67
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIA GAZETTE

Mailing Address
216 IRON-BOUND RD

City State Zip Code
WILLIAMSBURG VA 23188

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
PHILLIP KELLAM

Calendar Year-To-Date Per Election for Office Sought 983.90

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

Amount
57.48

Transaction ID: SE24.10689
Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIA GAZETTE

Mailing Address
216 IRON-BOUND RD

City State Zip Code
WILLIAMSBURG VA 23188

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
ROBERT SCOTT

Calendar Year-To-Date Per Election for Office Sought 708.28

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

Amount
57.48

Transaction ID: SE24.10693
Office Sought: House State: VA
 Senate District: 3
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	114.96
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIA GAZETTE

Mailing Address
216 IRON-BOUND RD

City State Zip Code
WILLIAMSBURG VA 23188

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
TOM O'DONOGHUE

Calendar Year-To-Date Per Election for Office Sought 708.28

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

Amount
57.48

Transaction ID: SE24.10694

Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIA GAZETTE

Mailing Address
216 IRON-BOUND RD

City State Zip Code
WILLIAMSBURG VA 23188

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
C.W. CARRICO

Calendar Year-To-Date Per Election for Office Sought 505.54

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

Amount
57.48

Transaction ID: SE24.10695

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	114.96
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIA GAZETTE

Mailing Address
216 IRON-BOUND RD

City State Zip Code
WILLIAMSBURG VA 23188

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
JUDY FEDER

Calendar Year-To-Date Per Election for Office Sought 708.28

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

Amount
57.48

Transaction ID: SE24.10697
Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIA GAZETTE

Mailing Address
216 IRON-BOUND RD

City State Zip Code
WILLIAMSBURG VA 23188

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
THOMAS DAVIS

Calendar Year-To-Date Per Election for Office Sought 260.22

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

Amount
57.48

Transaction ID: SE24.10698
Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	114.96
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIA GAZETTE

Mailing Address
216 IRON-BOUND RD

City	State	Zip Code
WILLIAMSBURG	VA	23188

Purpose of Expenditure ADVERTISEMENT	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
JAMES WEBB

Calendar Year-To-Date Per Election for Office Sought	708.37
---	--------

Date

M M	/	D D	/	Y Y Y Y
1 0		3 1		2 0 0 6

Amount

57.54

Transaction ID: SE24.10699

Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIAN PILOT

Mailing Address
4565 VIRGINIA BEACH BLVD

City	State	Zip Code
VIRGINIA BEACH	VA	23462

Purpose of Expenditure ADVERTISEMENT	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
JO ANN DAVIS

Calendar Year-To-Date Per Election for Office Sought	275.62
---	--------

Date

M M	/	D D	/	Y Y Y Y
1 0		3 1		2 0 0 6

Amount

275.62

Transaction ID: SE24.10590

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : 3170

(a) SUBTOTAL of Itemized Independent Expenditures	333.16
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

Date

M M	/	D D	/	Y Y Y Y
1 2		1 3		2 0 0 6

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIAN PILOT

Mailing Address
4565 VIRGINIA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23462
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Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
PHILLIP KELLAM

Calendar Year-To-Date Per Election for Office Sought	275.62
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Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Amount
275.62

Transaction ID: SE24.10591

Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIAN PILOT

Mailing Address
4565 VIRGINIA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23462
------------------------	-------------	-------------------

Purpose of Expenditure ADVERTISEMENT	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
ROBERT SCOTT

Calendar Year-To-Date Per Election for Office Sought	983.90
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Date
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Amount
275.62

Transaction ID: SE24.10706

Office Sought: House State: VA
 Senate District: 3
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	551.24
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIAN PILOT

Mailing Address
4565 VIRGINIA BEACH BLVD

City State Zip Code
VIRGINIA BEACH VA 23462

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
TOM O'DONOGHUE

Calendar Year-To-Date Per Election for Office Sought 983.90

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

Amount
275.62

Transaction ID: SE24.10707
Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
VIRGINIAN PILOT

Mailing Address
4565 VIRGINIA BEACH BLVD

City State Zip Code
VIRGINIA BEACH VA 23462

Purpose of Expenditure Category/Type
ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
C.W. CARRICO

Calendar Year-To-Date Per Election for Office Sought 781.16

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

Amount
275.62

Transaction ID: SE24.10708
Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	551.24
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
Signature

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

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) SOUTHERN STATES POLICE BENEVOLENT ASSOC PAC FUND	FEC IDENTIFICATION NUMBER ▼ C C00265546
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
 VIRGINIAN PILOT

Mailing Address
 4565 VIRGINIA BEACH BLVD

City State Zip Code
 VIRGINIA BEACH VA 23462

Purpose of Expenditure Category/Type
 ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
 JUDY FEDER

Calendar Year-To-Date Per Election for Office Sought 983.90

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

Amount
275.62

Transaction ID: SE24.10709
 Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
 VIRGINIAN PILOT

Mailing Address
 4565 VIRGINIA BEACH BLVD

City State Zip Code
 VIRGINIA BEACH VA 23462

Purpose of Expenditure Category/Type
 ADVERTISEMENT 004

Name of Federal Candidate supported or Opposed by expenditure:
 JAMES WEBB

Calendar Year-To-Date Per Election for Office Sought 984.03

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

Amount
275.66

Transaction ID: SE24.10710
 Office Sought: House State: VA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	551.28
(b) SUBTOTAL of Unitemized Independent Expenditures	278.33
(c) TOTAL Independent Expenditures	8921.01

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACK ROBERTS
 Signature

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