

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For 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  
Westmoreland for Congress

ADDRESS (number and street) P.O. Box 458  
 Check if different than previously reported. (ACC)  
Sharpsburg GA 30277

2. **FEC IDENTIFICATION NUMBER** C00387126  
**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**  
3. **IS THIS REPORT**  **NEW (N)** **OR**  **AMENDED (A)**  
GA 3

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 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2007 through 09 30 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 Ann Hand

Signature of Treasurer Electronically Filed by Ann Hand Date 10 15 2007

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									
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Westmoreland for Congress

Report Covering the Period: From:    To:

	<b>COLUMN A</b> This Period	<b>COLUMN B</b> Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	176600.00	316711.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	176600.00	314961.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	34214.25	136660.35
(b) Total Offsets to Operating Expenditures (from Line 14).....	14.75	69.97
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	34199.50	136590.38
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	558671.30	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
Westmoreland for Congress

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

117840.00

174810.00

(ii) Unitemized.....

1760.00

6751.00

(iii) TOTAL of contributions

119600.00

181561.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

57000.00

135150.00

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans)

176600.00

316711.00

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

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

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

14.75

69.97

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

0.00

0.00

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

176614.75

316780.97

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	34214.25	136660.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	25000.00	115000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	750.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1750.00
21. OTHER DISBURSEMENTS.....	3450.00	21950.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	62664.25	275360.35

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	444720.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	176614.75
25. SUBTOTAL (add Line 23 and Line 24).....	621335.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	62664.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	558671.30

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 90
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)  
Westmoreland for Congress

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

Mailing Address 2800 Shirlington Road #300

City Arlington State VA Zip Code 22206

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 06 / 2007

Transaction ID: 70910.C5449

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Action Comm. for Rural Electrificat. PAC

Mailing Address 4301 Wilson Blvd

City Arlington State VA Zip Code 22203-1867

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 06 / 2007

Transaction ID: 70910.C5455

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
AFLAC, Inc. PAC

Mailing Address 1932 Wynnton Road Attn: Bill Dudley

City Columbus State GA Zip Code 31999

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2007

Transaction ID: 71010.C5626

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 90
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
AGL Resources Inc. PAC

Mailing Address Attn Bill Park  
P.O. Box 4569

City Atlanta State GA Zip Code 30302

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5519

Amount of Each Receipt this Period  
2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Aircraft Owners & Pilots Association PAC

Mailing Address 421 Aviation Way

City Frederick State MD Zip Code 21701

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5465

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
American Academy of Audiology PAC

Mailing Address 11730 Plaza America Dr Ste 100  
Suite 100

City Reston State VA Zip Code 20190-4749

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2007

Transaction ID: 70910.C5456

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 90
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
American Bankers Assoc. PAC

Mailing Address 1120 Connecticut Ave NW

City Washington State DC Zip Code 20036-3905

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5534

Amount of Each Receipt this Period  
2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
American Dental PAC

Mailing Address 1111 - 14th Street NW Suite 1100

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2007

Transaction ID: 71010.C5634

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Anheuser-Busch PAC

Mailing Address One Busch Place, 202-5

City Saint Louis State MO Zip Code 63118

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5611

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 90
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A. Associated Builders & Contractors PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 4250 North Fairfax Drive, 9th Floor

City Arlington State VA Zip Code 22203

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2007

Transaction ID: 70910.C5457

Amount of Each Receipt this Period  
2500.00

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

**B. AT&T PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 175 E Houston St Rm 7-A-50

City San Antonio State TX Zip Code 78205-2255

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2007

Transaction ID: 71010.C5636

Amount of Each Receipt this Period  
1000.00

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

**C. Atmos Energy PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 5430 LBJ Freeway, Ste. 160  
Attn: Junior Aston

City Dallas State TX Zip Code 75240

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5560

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 90
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
BNSF RailPAC

Mailing Address PO Box 961039

City State Zip Code  
Fort Worth TX 76161-0039

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5528

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Build PAC

Mailing Address 1201 15th St. NW

City State Zip Code  
Washington DC 20005-2800

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5535

Amount of Each Receipt this Period  
5000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Checkfree Corp. PAC

Mailing Address 4411 E. Jones Bridge Road  
Attn: Brenda C. Jones

City State Zip Code  
Norcross GA 30092-1615

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5515

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 90
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Coca-Cola Enterprises PAC

Mailing Address Attn: Gene Rackley  
P.O. Box 723040

City Atlanta State GA Zip Code 31139-0040

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5467

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Committee for Advancement of Cotton PAC

Mailing Address Attn: Mr. John McGuire  
P.O. Box 820292

City Memphis State TN Zip Code 38182

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2007

Transaction ID: 71010.C5623

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Committee to Elect Seth Harp

Mailing Address 122 Enterprise Ct Ste D  
Suite D

City Columbus State GA Zip Code 31904-3666

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5557

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 90
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Committee for Adv. of S.E. Cotton PAC

Mailing Address 75 Elliott Road  
Suite 110

City Dawsonville State GA Zip Code 30534

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2007

Transaction ID: 71010.C5624

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative Action Council

Mailing Address 601 Pennsylvania Ave., NW  
South Bldg., Suite 600

City Washington State DC Zip Code 20004-2601

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5531

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
CSX Corp. Good Govt Fund

Mailing Address 1331 Pennsylvania Ave. NW  
Suite 560

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 20 / 2007

Transaction ID: 70910.C5466

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 90
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Dealers Election Action Committee of

Mailing Address National Auto Dealers Association  
8400 Westpark Drive

City State Zip Code  
Mc Lean VA 22102

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2007

Transaction ID: 70910.C5488

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Equifax PAC

Mailing Address Attn: Mr. Kirby Thompson  
P.O. Box 4081

City State Zip Code  
Atlanta GA 30302

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5518

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Every Republican is Crucial - ERICPAC

Mailing Address 25 E Main St.  
Suite 200

City State Zip Code  
Richmond VA 23219

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5521

Amount of Each Receipt this Period  
5000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 90
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Federal Express PAC

Mailing Address 101 Constitution Ave NW Ste 801

City Washington State DC Zip Code 20001-2133

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2007

**Transaction ID:** 71010.C5637

Amount of Each Receipt this Period  
 5000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Georgia Oilmens Assoc. PAC

Mailing Address 1775 Spectrum Drive Suite 100

City Lawrenceville State GA Zip Code 30043

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 17 / 2007

**Transaction ID:** 70910.C5526

Amount of Each Receipt this Period  
 500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Georgia Power Company PAC

Mailing Address 241 Ralph McGill Blvd. N.E. Bin 10230

City Atlanta State GA Zip Code 30308-3374

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 20 / 2007

**Transaction ID:** 70910.C5477

Amount of Each Receipt this Period  
 3000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 90
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Home Depot Inc., PAC

Mailing Address 2455 Paces Ferry Rd., NW  
Floor C-17

City Atlanta State GA Zip Code 30339-4024

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5612

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
McKenna Long Aldridge PAC

Mailing Address 303 Peachtree St.  
Suite 5300

City Atlanta State GA Zip Code 30308

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5532

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Natl Air Traffic Controllers Assoc. PAC

Mailing Address 1325 Massachusetts Ave NW

City Washington State DC Zip Code 20005-4171

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2007

Transaction ID: 71010.C5633

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 15 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Orthopaedic PAC  
Mailing Address 317 Massachusetts Ave NE  
City State Zip Code  
Washington DC 20002-5769  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2007  
Transaction ID: 71010.C5625  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Owner Operator Ind. Drivers Assoc. PAC  
Mailing Address 1101 30th Street N.W.  
City State Zip Code  
Washington DC 20007  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2007  
Transaction ID: 70910.C5485  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
PHCC - PAC  
Mailing Address 160 S. Washington St.  
City State Zip Code  
Falls Church VA 22046  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2007  
Transaction ID: 71010.C5631  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3000.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 90
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
Westmoreland for Congress

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

Mailing Address 1900 K Street N.W.  
Attn: Allen Weltmann

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2007

Transaction ID: 71010.C5632

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Realtors PAC

Mailing Address 430 N. Michigan Ave.

City Chicago State IL Zip Code 60611

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5533

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
RJR Political Action Committee

Mailing Address P.O. Box 718  
Attn: John H. Fish

City Winston Salem State NC Zip Code 27102

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2007

Transaction ID: 70910.C5487

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 90
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
The Coca-Cola Company PAC

Mailing Address P.O. Drawer 1734

City State Zip Code  
Atlanta GA 30301

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5613

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
The Coca-Cola Company PAC

Mailing Address P.O. Drawer 1734

City State Zip Code  
Atlanta GA 30301

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2007

Transaction ID: 71010.C5627

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Truck PAC

Mailing Address 430 First Street SE  
Attn: Gray L. Mitchell

City State Zip Code  
Washington DC 20003

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2007

Transaction ID: 71010.C5635

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 90
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

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

Mailing Address Attn: Rogers Wade  
P.O. Box 1738

City State Zip Code  
Atlanta GA 30301-1738

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	0	7

Transaction ID: 70910.C5520

Amount of Each Receipt this Period  
2500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	57000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mark Accetturo

Mailing Address 121 Roberts St.

City State Zip Code  
Fairburn GA 30213

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

Name of Employer Reynolds, Inc. Occupation Vice President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2007

Transaction ID: 70910.C5491

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Steve Adams

Mailing Address P.O. Box 624

City State Zip Code  
Carrollton GA 30117

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

Name of Employer West GA Ambulance, Inc. Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 06 / 2007

Transaction ID: 70910.C5450

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Merett Alexander

Mailing Address 3350 Lower Blue Springs Road

City State Zip Code  
Hamilton GA 31811-6505

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

Name of Employer Alexander Contracting Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 20 / 2007

Transaction ID: 70910.C5460

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Daniel Amos

Mailing Address P.O. Box 5566

City State Zip Code  
Columbus GA 31906

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

Name of Employer Occupation  
AFLAC, Inc. CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 23 / 2007

Transaction ID: 70910.C5559

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Alvan Arnall

Mailing Address 4085 Whitewater Creek Road

City State Zip Code  
Atlanta GA 30327

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

Name of Employer Occupation  
None Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5525

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Alvan Arnall

Mailing Address 4085 Whitewater Creek Road

City State Zip Code  
Atlanta GA 30327

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

Name of Employer Occupation  
None Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5588

Amount of Each Receipt this Period  
750.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Gordon Austin

Mailing Address 819 Dixie Street

City State Zip Code  
Carrollton GA 30117

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

Name of Employer Self-Employed Occupation  
Oral Surgeon

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 690.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2007

Transaction ID: 70910.C5480

Amount of Each Receipt this Period  
230.00

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

**B.** Full Name (Last, First, Middle Initial)  
Gordon Austin

Mailing Address 819 Dixie Street

City State Zip Code  
Carrollton GA 30117

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

Name of Employer Self-Employed Occupation  
Oral Surgeon

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 920.00

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2007

Transaction ID: 70910.C5565

Amount of Each Receipt this Period  
230.00

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

**C.** Full Name (Last, First, Middle Initial)  
Gordon Austin

Mailing Address 819 Dixie Street

City State Zip Code  
Carrollton GA 30117

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

Name of Employer Self-Employed Occupation  
Oral Surgeon

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1150.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2007

Transaction ID: 71010.C5618

Amount of Each Receipt this Period  
230.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	690.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Meredith Austin

Mailing Address 819 Dixie Street

City State Zip Code  
Carrollton GA 30117

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 690.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 01 / 2007

Transaction ID: 70910.C5481

Amount of Each Receipt this Period  
230.00

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

**B.** Full Name (Last, First, Middle Initial)  
Meredith Austin

Mailing Address 819 Dixie Street

City State Zip Code  
Carrollton GA 30117

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 920.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2007

Transaction ID: 70910.C5479

Amount of Each Receipt this Period  
230.00

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

**C.** Full Name (Last, First, Middle Initial)  
Meredith Austin

Mailing Address 819 Dixie Street

City State Zip Code  
Carrollton GA 30117

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1150.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 31 / 2007

Transaction ID: 70910.C5566

Amount of Each Receipt this Period  
230.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	690.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Meredith Austin

Mailing Address 819 Dixie Street

City State Zip Code  
Carrollton GA 30117

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1380.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2007

Transaction ID: 71010.C5617

Amount of Each Receipt this Period  
230.00

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

**B.** Full Name (Last, First, Middle Initial)  
Gregory Auten

Mailing Address P.O. Box 5149

City State Zip Code  
Columbus GA 31906

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

Name of Employer Occupation  
Glover - Auten Foods Vice President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5500

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jonathan Barkan

Mailing Address 240 Lake Summit View, NE.

City State Zip Code  
Atlanta GA 30342

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

Name of Employer Occupation  
Stockman USA Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5501

Amount of Each Receipt this Period  
750.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1480.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Clayton Barker

Mailing Address 4779 Sedberry Hill Ct.

City Atlanta State GA Zip Code 30339

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

Name of Employer Mueller Water Products, Inc. Occupation General Counsel

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2007

Transaction ID: 70910.C5489

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Jonathan Been

Mailing Address 3137 Chestnut Dr

City Atlanta State GA Zip Code 30340-3205

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

Name of Employer Home Life Communities Occupation President and CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5463

Amount of Each Receipt this Period  
2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jonathan Been

Mailing Address 3137 Chestnut Dr

City Atlanta State GA Zip Code 30340-3205

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

Name of Employer Home Life Communities Occupation President and CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4300.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5464

Amount of Each Receipt this Period  
2000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5300.00**

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



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Walker Bickerstaff

Mailing Address P.O. Box 942

City State Zip Code  
Columbus GA 31902

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5476

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
James Blanchard

Mailing Address P.O. Box 120

City State Zip Code  
Columbus GA 31902

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

Name of Employer Synovus Occupation CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5461

Amount of Each Receipt this Period  
2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
James Blanchard

Mailing Address P.O. Box 120

City State Zip Code  
Columbus GA 31902

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

Name of Employer Synovus Occupation CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5547

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

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

Mailing Address 227 Sunset Rd

City State Zip Code  
Columbus GA 31904-2851

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

Name of Employer  
Columbus Bank & Trust

Occupation  
Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5548

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
William Blanchard

Mailing Address 227 Sunset Rd

City State Zip Code  
Columbus GA 31904-2851

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

Name of Employer  
Columbus Bank & Trust

Occupation  
Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  
MM / DD / YYYY  
09 / 06 / 2007

Transaction ID: 70910.C5574

Amount of Each Receipt this Period  
1300.00

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

**C.** Full Name (Last, First, Middle Initial)  
Scott Bradshaw

Mailing Address 251 Smoke Rise Trace

City State Zip Code  
Peachtree City GA 30269

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

Name of Employer  
The Bradshaw Company

Occupation  
President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5552

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Carol Brady

Mailing Address 410 Vanderwall

City State Zip Code  
Peachtree City GA 30269

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1050.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5602

Amount of Each Receipt this Period  
1300.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mike Brady

Mailing Address 410 Vanderwall

City State Zip Code  
Peachtree City GA 30269

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5601

Amount of Each Receipt this Period  
2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
Stephen Butler

Mailing Address 6935 Hilltop Ct.

City State Zip Code  
Columbus GA 31904

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

Name of Employer W.C. Bradley Co. Occupation Chairman and CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2007

Transaction ID: 70910.C5486

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jennie Caldwell

Mailing Address 1135 East Hwy. 16

City State Zip Code  
Newnan GA 30263

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

Name of Employer Occupation  
Caldwell Poured Foundations Office Manager

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5589

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Eugene Callaway

Mailing Address 3535 Simpson Way

City State Zip Code  
Lawrenceville GA 30044

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

Name of Employer Occupation  
Self-Employed Jeweler

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5508

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Greg Camp

Mailing Address 3311 Cathryn Dr

City State Zip Code  
Columbus GA 31906-1116

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

Name of Employer Occupation  
National Infantry Foundation Executive Vice President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5543

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Sam Chawkin

Mailing Address 700 Park Regency PI NE Apt 2403  
Unit 2403

City Atlanta State GA Zip Code 30326-4226

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

Name of Employer Pull-A-Part Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5499

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ben Cheek

Mailing Address 1626 Summit Drive

City Columbus State GA Zip Code 31906

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5513

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Alan Cohen

Mailing Address 1760 Brandon Hall Dr

City Atlanta State GA Zip Code 30350-3705

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

Name of Employer Pull-A-Part Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5504

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mark Cohen

Mailing Address 5480 Shiver Smt NE

City Atlanta State GA Zip Code 30342-1427

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

Name of Employer Pull-A-Part Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5505

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Catherine Coppedge

Mailing Address 2109 Garrard St

City Columbus State GA Zip Code 31906-1430

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

Name of Employer AFLAC, Inc. Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5497

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Lovick Corn

Mailing Address P.O. Box 140

City Columbus State GA Zip Code 31902

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5558

Amount of Each Receipt this Period  
2300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3550.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
WM Thomas Craig

Mailing Address PO Box 1587

City State Zip Code  
Covington GA 30015-1587

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

Name of Employer Self-Employed  
Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5475

Amount of Each Receipt this Period  
2300.00

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

**B.** Full Name (Last, First, Middle Initial)  
James Crane

Mailing Address 860 Gary Summers Rd.

City State Zip Code  
Senoia GA 30276

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

Name of Employer Crane and Associates, Inc.  
Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5598

Amount of Each Receipt this Period  
2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
Herbert Crawford

Mailing Address P.O. Box 263

City State Zip Code  
Luthersville GA 30251-0263

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

Name of Employer Crawford Grading  
Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  
MM / DD / YYYY  
09 / 06 / 2007

Transaction ID: 70910.C5575

Amount of Each Receipt this Period  
2300.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Claire DAgostino

Mailing Address 32 Brandon Ridge Dr NE

City State Zip Code  
Sandy Springs GA 30328-2136

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

Name of Employer City of Atlanta Occupation Administrator

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5496

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ann Davis

Mailing Address 2450 W Wesley Rd NW

City State Zip Code  
Atlanta GA 30327-2032

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5529

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jay Davis

Mailing Address 2450 W Wesley Rd NW

City State Zip Code  
Atlanta GA 30327-2032

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

Name of Employer National Distributing Co. Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5530

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Rob Doll

Mailing Address P.O. Box 6309

City State Zip Code  
Columbus GA 31907

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

Name of Employer Rob Doll Nissan Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 23 / 2007

Transaction ID: 70910.C5564

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Richard Dumas

Mailing Address P.O. Box 142490

City State Zip Code  
Fayetteville GA 30214

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

Name of Employer J & R Clothing Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5592

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Doug Duncan

Mailing Address 60 Lakeridge Ct

City State Zip Code  
Columbus GA 31904-1800

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

Name of Employer Kennon and Parker Realtors Occupation Broker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 23 / 2007

Transaction ID: 70910.C5539

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Michael Faulkner

Mailing Address 235 Creek View Trail

City Fayetteville State GA Zip Code 30214-7231

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

Name of Employer: Faulkner Commercial Group, Inc  
Occupation: Real Estate Broker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 09 / 21 / 2007

Transaction ID: 71010.C5587

Amount of Each Receipt this Period: 250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Larry Galbraith

Mailing Address 6337 Brookstone Blvd

City Columbus State GA Zip Code 31904-2993

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

Name of Employer: Denim North America  
Occupation: Textiles

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 21 / 2007

Transaction ID: 71010.C5590

Amount of Each Receipt this Period: 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Karl Gallant

Mailing Address 9506 Gauge Dr

City Fairfax Station State VA Zip Code 22039-3203

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

Name of Employer: Information Requested  
Occupation: Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 30 / 2007

Transaction ID: 71010.C5630

Amount of Each Receipt this Period: 500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
John Gamwell

Mailing Address 4424 Orchard Trace

City Roswell State GA Zip Code 30076-6000

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5494

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Charles Gower

Mailing Address 8707 Grey Rock Rd

City Midland State GA Zip Code 31820-3506

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5563

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Greg Harrell

Mailing Address 665 Birkdale Drive

City Fayetteville State GA Zip Code 30215

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

Name of Employer Fairburn Ready Mix, Inc. Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1200.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5594

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **950.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Greg Harrell

Mailing Address 665 Birkdale Drive

City State Zip Code  
Fayetteville GA 30215

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

Name of Employer Fairburn Ready Mix, Inc. Occupation Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5593

Amount of Each Receipt this Period  
1300.00

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

**B.** Full Name (Last, First, Middle Initial)  
George Jeter

Mailing Address 1222 Broadway Ste 101

City State Zip Code  
Columbus GA 31901-2492

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

Name of Employer None Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 20 / 2007

Transaction ID: 70910.C5472

Amount of Each Receipt this Period  
1300.00

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

**C.** Full Name (Last, First, Middle Initial)  
Ann Johnson

Mailing Address 1222 Broadway, Ste. 104

City State Zip Code  
Columbus GA 31901

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

Name of Employer None Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 23 / 2007

Transaction ID: 70910.C5545

Amount of Each Receipt this Period  
750.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Kenny Johnson

Mailing Address 110 Bastille Way  
Suite B

City Fayetteville State GA Zip Code 30214

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

Name of Employer Kenny Johnson Homes Occupation President and CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 06 / 2007

Transaction ID: 70910.C5570

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Lamar Johnson

Mailing Address 1222 Broadway Ste 104  
Suite 104

City Columbus State GA Zip Code 31901-2492

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

Name of Employer Self-Employed Occupation Investigator

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 23 / 2007

Transaction ID: 70910.C5542

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Kelsey Kennon

Mailing Address PO Box 4400

City Columbus State GA Zip Code 31914-0400

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

Name of Employer Kennon and Parker Realtors Occupation Broker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 23 / 2007

Transaction ID: 70910.C5556

Amount of Each Receipt this Period  
250.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jack Key

Mailing Address 6682 Waterford Court

City Columbus State GA Zip Code 31904

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

Name of Employer Kennon, Parker, Duncan Occupation Real Estate Broker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5555

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Timothy Kibler

Mailing Address 115 Biscayne Drive NW G4

City Atlanta State GA Zip Code 30309

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

Name of Employer GA Assn of Realtors Occupation Governmental Affairs

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5507

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
John Kinnett

Mailing Address P.O. Box 1480

City Columbus State GA Zip Code 31902

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

Name of Employer Kinnett Enterprises, Inc. Occupation President and CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 06 / 2007

Transaction ID: 70910.C5571

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Martin Kogon

Mailing Address 5780 Winterthur Ln NW

City Atlanta State GA Zip Code 30328-4624

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

Name of Employer Pull-A-Part Occupation CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5506

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Michael Kogon

Mailing Address 505 Bridgewater Drive, NW.

City Atlanta State GA Zip Code 30328

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

Name of Employer Definition6 Occupation CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5503

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Ross Kogon

Mailing Address 44 W Ferry Dr NE

City Atlanta State GA Zip Code 30319-4310

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

Name of Employer Pull-A-Part Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5498

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Robert Koon

Mailing Address 514 Spring Harbor Dr

City State Zip Code  
Columbus GA 31904-9502

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5474

Amount of Each Receipt this Period  
1300.00

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

**B.** Full Name (Last, First, Middle Initial)  
Stacey Leebern

Mailing Address 1 Mountainbrook Ct.

City State Zip Code  
Columbus GA 31904-3308

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2007

Transaction ID: 70910.C5451

Amount of Each Receipt this Period  
2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
Stacey Leebern

Mailing Address 1 Mountainbrook Ct.

City State Zip Code  
Columbus GA 31904-3308

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2007

Transaction ID: 70910.C5452

Amount of Each Receipt this Period  
2300.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Donald Leeborn, III

Mailing Address P.O. Box 7908

City State Zip Code  
Columbus GA 31908

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

Name of Employer Georgia Crown Dist. Company  
Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2007

Transaction ID: 70910.C5454

Amount of Each Receipt this Period  
2300.00

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

**B.** Full Name (Last, First, Middle Initial)  
Donald Leeborn, III

Mailing Address P.O. Box 7908

City State Zip Code  
Columbus GA 31908

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

Name of Employer Georgia Crown Dist. Company  
Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4600.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2007

Transaction ID: 70910.C5453

Amount of Each Receipt this Period  
2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
James Long

Mailing Address 83 Vaughn Road

City State Zip Code  
Newnan GA 30265

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

Name of Employer Self-Employed  
Occupation Dentist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5597

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5600.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Lisa Long

Mailing Address 83 Vaughn Rd.

City Newnan State GA Zip Code 30265

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt  
09 / 21 / 2007

Transaction ID: 71010.C5595

Amount of Each Receipt this Period  
1300.00

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

**B.** Full Name (Last, First, Middle Initial)  
Joey Loudermilk

Mailing Address 1186 Mayo Road

City Ellerslie State GA Zip Code 31807

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

Name of Employer AFLAC, Inc. Occupation President and CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
08 / 23 / 2007

Transaction ID: 70910.C5549

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
R. Charles Loudermilk

Mailing Address 309 E Paces Ferry Rd NE Ste 1100 Suite 1100

City Atlanta State GA Zip Code 30305-2385

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

Name of Employer Aaron Rents, Inc. Occupation Chairman

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
08 / 17 / 2007

Transaction ID: 70910.C5527

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2550.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Larry Lynn

Mailing Address 1336 Central Ave.

City State Zip Code  
East Point GA 30344

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

Name of Employer  
Central Builders Supply Co. Inc

Occupation  
Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5517

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Colin Martin

Mailing Address 7012 Winthrop Court

City State Zip Code  
Columbus GA 31904

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

Name of Employer  
Winship Clinic, P.C.

Occupation  
Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5541

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Jackie Mask

Mailing Address 297 Brooks Woolsey Rd

City State Zip Code  
Fayetteville GA 30215-7023

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

Name of Employer  
None

Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2007

Transaction ID: 71010.C5622

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Charles McClure

Mailing Address 7200 Layfield Rd

City State Zip Code  
Upatoi GA 31829-1702

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

Name of Employer  
McClure Broadcasting, Inc. Occupation  
President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 23 / 2007

Transaction ID: 70910.C5544

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
James Miller

Mailing Address 1956 River Forest Rd.

City State Zip Code  
Atlanta GA 30327

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

Name of Employer  
Fidelity National Bank Occupation  
Chairman

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5516

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Hugh Morton

Mailing Address 2509 Hwy 92 South

City State Zip Code  
Fayetteville GA 30215

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

Name of Employer  
Peachtree Homes Occupation  
Real Estate Developer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 06 / 2007

Transaction ID: 70910.C5569

Amount of Each Receipt this Period  
500.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jerry Newman

Mailing Address 1420 Wynnton Road

City State Zip Code  
Columbus GA 31906

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

Name of Employer Occupation  
Park Properties Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 06 / 2007

Transaction ID: 70910.C5573

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Dan Parker

Mailing Address 2623 Carson Dr

City State Zip Code  
Columbus GA 31906-1558

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 23 / 2007

Transaction ID: 70910.C5538

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Patricia Pearce

Mailing Address PO Box 2049

City State Zip Code  
Kennesaw GA 30156-9100

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

Name of Employer Occupation  
Creamer - Pearce LLC Accounting

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5510

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
John Pezold

Mailing Address 600 Brookstone PKWY

City State Zip Code  
Columbus GA 31904

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

Name of Employer Occupation  
Pezold Management Co. President and CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 06 / 2007

Transaction ID: 70910.C5567

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Noel Poirier

Mailing Address 35 Cove Point

City State Zip Code  
Newnan GA 30263

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

Name of Employer Occupation  
Airtran Airways, Inc. Pilot

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 06 / 2007

Transaction ID: 70910.C5448

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Samuel Rawls

Mailing Address 6001 River Rd Ste 400

City State Zip Code  
Columbus GA 31904-4555

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

Name of Employer Occupation  
Self-Employed Insurance Sales

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 06 / 2007

Transaction ID: 70910.C5572

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Robert Redding

Mailing Address 405 Rucker Place

City State Zip Code  
Alexandria VA 22301

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

Name of Employer Occupation  
The Redding Firm President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2007

Transaction ID: 71010.C5621

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ralph Reed

Mailing Address 2808 Major Ridge Trail

City State Zip Code  
Duluth GA 30097

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

Name of Employer Occupation  
Century Strategies Public Relations Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5509

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
David Richardson

Mailing Address 300 Bledsoe St Apt B4

City State Zip Code  
Carrollton GA 30117-4058

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

Name of Employer Occupation  
None Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5578

Amount of Each Receipt this Period  
30.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2030.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jerry Robinson

Mailing Address 506 Tuxedo Ln

City Peachtree City State GA Zip Code 30269-4070

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

Name of Employer First American Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2007

Transaction ID: 70910.C5492

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Benjamin Robuck

Mailing Address 23 Brookwood Drive

City Newnan State GA Zip Code 30263

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

Name of Employer Florida Rock Industries, Inc. Occupation Vice Pres. - Sales

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5585

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
James Rose

Mailing Address PO Box 8127

City Columbus State GA Zip Code 31908-8127

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

Name of Employer Affordable Mortgage Occupation Mortgage Broker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5536

Amount of Each Receipt this Period  
500.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Donnie Russell

Mailing Address P.O. Box 276

City State Zip Code  
Jonesboro GA 30237

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

Name of Employer Occupation  
Parham Industries, Inc. Sales

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1500.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2007

Transaction ID: 70910.C5484

Amount of Each Receipt this Period  
1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Tracy Sayers

Mailing Address 871 Graystone Dr

City State Zip Code  
Columbus GA 31904-4304

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

Name of Employer Occupation  
Pezold Management Co. Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5586

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Ray Smith

Mailing Address 850 Edgewater Trail NW

City State Zip Code  
Atlanta GA 30328-2825

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

Name of Employer Occupation  
Marshall and Lueder, LLC Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5524

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Edward Sprouse

Mailing Address 2733 Averett Drive

City Columbus State GA Zip Code 31906

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

Name of Employer Page, Scrantom, Sprouse et. al Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5514

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Richard Stephens

Mailing Address P.O. Box 12109

City Columbus State GA Zip Code 31907

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

Name of Employer Freeway Ford, Inc. Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 20 / 2007

Transaction ID: 70910.C5459

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Wayne Stone

Mailing Address 3680 Smokey Rd

City Newnan State GA Zip Code 30263-5038

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 23 / 2007

Transaction ID: 70910.C5551

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jonathan Strack

Mailing Address 2767 Brookgrove Lane

City Atlanta State GA Zip Code 30339-5331

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

Name of Employer Strack Inc. Occupation Contractor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5591

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Thomas Sweet

Mailing Address 105 Pickens Dr.

City Newnan State GA Zip Code 30263-1500

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

Name of Employer Cornerstone and Associates Occupation Builder/Developer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5603

Amount of Each Receipt this Period  
2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
Thomas Sweet

Mailing Address 105 Pickens Dr.

City Newnan State GA Zip Code 30263-1500

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

Name of Employer Cornerstone and Associates Occupation Builder/Developer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5604

Amount of Each Receipt this Period  
2300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5600.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Joe Tanner

Mailing Address 50 Hurt Plaza  
Suite 930

City Atlanta State GA Zip Code 30303

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

Name of Employer Joe Tanner and Associates Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5550

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
R.J. Tedder

Mailing Address 335 Marllyn Dr. W.

City Fayetteville State GA Zip Code 30214

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2007

Transaction ID: 71010.C5620

Amount of Each Receipt this Period  
200.00

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

**C.** Full Name (Last, First, Middle Initial)  
Stanley Thomas

Mailing Address 45 Ansley Drive

City Newnan State GA Zip Code 30263

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

Name of Employer Thomas Enterprises, Inc. Occupation President and CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5553

Amount of Each Receipt this Period  
2300.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Stanley Thomas

Mailing Address 45 Ansley Drive

City State Zip Code  
Newnan GA 30263

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

Name of Employer  
Thomas Enterprises, Inc. Occupation  
President and CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4600.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5554

Amount of Each Receipt this Period  
2300.00

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

**B.** Full Name (Last, First, Middle Initial)  
Philip Tomlinson

Mailing Address 1600 First Avenue

City State Zip Code  
Columbus GA 31904

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

Name of Employer  
TSYS Occupation  
CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5470

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Philip Tomlinson

Mailing Address 1600 First Avenue

City State Zip Code  
Columbus GA 31904

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

Name of Employer  
TSYS Occupation  
CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70910.C5562

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

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

Mailing Address P.O. Box 140

City State Zip Code  
Columbus GA 31902

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5462

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Richard Ussery

Mailing Address 1 Mountain Ridge Ct.

City State Zip Code  
Columbus GA 31904

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

Name of Employer TSYs Occupation Chairman

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2007

Transaction ID: 70910.C5471

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Andrea Walker

Mailing Address 152 Hampton Road

City State Zip Code  
Fayetteville GA 30215

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

Name of Employer Walker Harris Trucking Co. Occupation Comptroller

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5599

Amount of Each Receipt this Period  
2300.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Andrea Walker

Mailing Address 152 Hampton Road

City State Zip Code  
Fayetteville GA 30215

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

Name of Employer Walker Harris Trucking Co. Occupation Comptroller

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2600.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5608

Amount of Each Receipt this Period  
300.00

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

**B.** Full Name (Last, First, Middle Initial)  
Barnard Walker

Mailing Address 145 Mary Lynn Lane

City State Zip Code  
Fayetteville GA 30214

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5607

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Debra Walker

Mailing Address 171 County Line Road

City State Zip Code  
Fayetteville GA 30215

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

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C5605

Amount of Each Receipt this Period  
2300.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3100.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Harold Walker

Mailing Address 152 Hampton Rd.

City State Zip Code  
Fayetteville GA 30215

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

Name of Employer Walker Harris Trucking Co. Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5610

Amount of Each Receipt this Period  
2300.00

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

**B.** Full Name (Last, First, Middle Initial)  
Harold Walker

Mailing Address 152 Hampton Rd.

City State Zip Code  
Fayetteville GA 30215

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

Name of Employer Walker Harris Trucking Co. Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5609

Amount of Each Receipt this Period  
2300.00

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

**C.** Full Name (Last, First, Middle Initial)  
William Walker

Mailing Address 171 County Line Road

City State Zip Code  
Fayetteville GA 30215

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

Name of Employer Walker Concrete Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C5606

Amount of Each Receipt this Period  
2300.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
J.A. Walters

Mailing Address 2401 Island Dr

City State Zip Code  
Gainesville GA 30501-1252

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

Name of Employer Occupation  
Walters Management Company President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5511

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Steven Wertheim

Mailing Address 70 Old Stratton Chase NW

City State Zip Code  
Atlanta GA 30328-3652

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5495

Amount of Each Receipt this Period  
250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Raymon White

Mailing Address P.O. Box 52696

City State Zip Code  
Atlanta GA 30355

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

Name of Employer Occupation  
Georgia Public Strategies President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70910.C5502

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 90
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

**A.** Full Name (Last, First, Middle Initial)  
Tim Williams

Mailing Address 3571 Todd Drive

City State Zip Code  
Douglasville GA 30135

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

Name of Employer Greystone Power Corp. Occupation V.P. Corporate Administration

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2007

Transaction ID: 70910.C5490

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Jimmy Yancey

Mailing Address P.O. Box 120

City State Zip Code  
Columbus GA 31902

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

Name of Employer Synovus Occupation Chairman

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2007

Transaction ID: 70910.C5540

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	117840.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. ADP Easypay Atlanta</b>		<b>Transaction ID:</b> 70910.E2303 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 7
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 81.74
City Atlanta State GA Zip Code 30328-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL FEES	Candidate Name	PAYROLL FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ADP Easypay Atlanta</b>		<b>Transaction ID:</b> 70910.E2304 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 7
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 461.75
City Atlanta State GA Zip Code 30328-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL TAXES	Candidate Name	PAYROLL TAXES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ADP Easypay Atlanta</b>		<b>Transaction ID:</b> 70910.E2305 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 7
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 82.25
City Atlanta State GA Zip Code 30328-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL TAXES	Candidate Name	PAYROLL TAXES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	625.74
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. ADP Easypay Atlanta</b>		<b>Transaction ID:</b> 71010.E2329 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 7
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 94.60
City Atlanta State GA Zip Code 30328-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL EXPENSES	Candidate Name	PAYROLL EXPENSES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ADP Easypay Atlanta</b>		<b>Transaction ID:</b> 71010.E2330 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 7
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 461.75
City Atlanta State GA Zip Code 30328-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL TAXES	Candidate Name	PAYROLL TAXES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ADP Easypay Atlanta</b>		<b>Transaction ID:</b> 71010.E2331 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 7
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 82.25
City Atlanta State GA Zip Code 30328-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL EXPENSES	Candidate Name	PAYROLL EXPENSES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	638.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. ADP Easypay Atlanta</b>		<b>Transaction ID:</b> 71010.E2369 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 7
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 85.60
City Atlanta State GA Zip Code 30328-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL EXPENSES	Candidate Name	PAYROLL EXPENSES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ADP Easypay Atlanta</b>		<b>Transaction ID:</b> 71010.E2370 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 461.75
City Atlanta State GA Zip Code 30328-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL TAXES	Candidate Name	PAYROLL TAXES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ADP Easypay Atlanta</b>		<b>Transaction ID:</b> 71010.E2371 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7
Mailing Address 5680 New Northside Drive		Amount of Each Disbursement this Period 82.25
City Atlanta State GA Zip Code 30328-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PAYROLL EXPENSES	Candidate Name	PAYROLL EXPENSES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	629.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID:</b> 70910.E2300 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 7
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 4.50
City Phoenix State AZ Zip Code 85072-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRANSACTION FEES	Candidate Name	TRANSACTION FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID:</b> 70910.E2301 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 5.95
City Phoenix State AZ Zip Code 85072-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRANSACTION FEES	Candidate Name	TRANSACTION FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		<b>Transaction ID:</b> 70910.E2302 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 7
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 5.00
City Phoenix State AZ Zip Code 85072-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRANSACTION FEES	Candidate Name	TRANSACTION FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 90

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID: 71010.E2325</b> Date of Disbursement 08 / 01 / 2007	
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 4.50	
City Phoenix State AZ Zip Code 85072-	Purpose of Disbursement TRANSACTION FEES Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>TRANSACTION FEES</b>	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID: 71010.E2326</b> Date of Disbursement 08 / 03 / 2007	
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 5.95	
City Phoenix State AZ Zip Code 85072-	Purpose of Disbursement TRANSACTION FEES Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>TRANSACTION FEES</b>	

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		<b>Transaction ID: 71010.E2328</b> Date of Disbursement 08 / 06 / 2007	
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 5.00	
City Phoenix State AZ Zip Code 85072-	Purpose of Disbursement TRANSACTION FEES Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>TRANSACTION FEES</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID:</b> 71010.E2327 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 7
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 24.49
City Phoenix State AZ Zip Code 85072-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRANSACTION FEES	Candidate Name	TRANSACTION FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID:</b> 71010.E2366 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 4.50
City Phoenix State AZ Zip Code 85072-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRANSACTION FEES	Candidate Name	TRANSACTION FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		<b>Transaction ID:</b> 71010.E2365 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 5.95
City Phoenix State AZ Zip Code 85072-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRANSACTION FEES	Candidate Name	TRANSACTION FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	34.94
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Transaction ID: 71010.E2367 Date of Disbursement 09 / 05 / 2007
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 116.82
City Phoenix State AZ Zip Code 85072-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRANSACTION FEES	Candidate Name	TRANSACTION FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Transaction ID: 71010.E2368 Date of Disbursement 09 / 06 / 2007
Mailing Address P.O. Box 53852		Amount of Each Disbursement this Period 5.00
City Phoenix State AZ Zip Code 85072-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRANSACTION FEES	Candidate Name	TRANSACTION FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Aristotle</b>		Transaction ID: 70910.E2254 Date of Disbursement 07 / 25 / 2007
Mailing Address 205 Pennsylvaina Ave. SE		Amount of Each Disbursement this Period 2247.00
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SOFTWARE	Candidate Name	SOFTWARE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2368.82
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 90

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		<b>Transaction ID:</b> 70910.E2250 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 7
Mailing Address Glenridge Highlands Two 5565 Glenridge Connector		Amount of Each Disbursement this Period 111.57
City Atlanta	State GA	
Zip Code 30342-		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement CELL PHONE		
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 <input type="checkbox"/> Other (specify) ▼	CELL PHONE
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		<b>Transaction ID:</b> 70910.E2258 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address Glenridge Highlands Two 5565 Glenridge Connector		Amount of Each Disbursement this Period 109.47
City Atlanta	State GA	
Zip Code 30342-		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement CELL PHONE		
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 <input type="checkbox"/> Other (specify) ▼	CELL PHONE
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		<b>Transaction ID:</b> 71010.E2314 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 7
Mailing Address Glenridge Highlands Two 5565 Glenridge Connector		Amount of Each Disbursement this Period 116.83
City Atlanta	State GA	
Zip Code 30342-		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement CELL PHONE		
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 <input type="checkbox"/> Other (specify) ▼	CELL PHONE
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	337.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Sprayberrys BBQ</b>		<b>Transaction ID:</b> 70910.E2293
Mailing Address Bullsboro Road		Date of Disbursement 07 / 25 / 2007
City Newnan	State GA	Zip Code 30265-
Purpose of Disbursement MEETING EXPENSE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 99.02	
<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
<b>[MEMO ITEM]</b> MEMO: MEETING EXPENSE		

Full Name (Last, First, Middle Initial) <b>B. U.S. Postal Service</b>		<b>Transaction ID:</b> 70910.E2295
Mailing Address 6545 Hwy. 54		Date of Disbursement 07 / 25 / 2007
City Sharpsburg	State GA	Zip Code 30277-
Purpose of Disbursement POSTAGE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 58.20	
<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
<b>[MEMO ITEM]</b> MEMO: POSTAGE		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		<b>Transaction ID:</b> 70910.E2294
Mailing Address P.O. Box 660108		Date of Disbursement 07 / 25 / 2007
City Dallas	State TX	Zip Code 75266-0108
Purpose of Disbursement CELL PHONE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 40.00	
<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
<b>[MEMO ITEM]</b> MEMO: CELL PHONE		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Bank of Coweta</b>		Transaction ID: 71010.E2311 Date of Disbursement 08 / 21 / 2007
Mailing Address Attn: Ann Hand P.O. Box 1218		Amount of Each Disbursement this Period 1633.12
City Newnan State GA Zip Code 30264-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW	Candidate Name	SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bank of Coweta</b>		Transaction ID: 71010.E2323 Date of Disbursement 08 / 21 / 2007
Mailing Address Attn: Ann Hand P.O. Box 1218		Amount of Each Disbursement this Period 40.00
City Newnan State GA Zip Code 30264-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement ANNUAL FEES	Candidate Name	<b>[MEMO ITEM]</b> MEMO: ANNUAL FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Bobby Vans Steakhouse</b>		Transaction ID: 71010.E2321 Date of Disbursement 08 / 21 / 2007
Mailing Address 809 15th St NW		Amount of Each Disbursement this Period 141.46
City Washington State DC Zip Code 20005-2203	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1633.12
<b>TOTAL</b> This Period (last page this line number only) .....	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Charlie Palmer Steakhouse</b>		Transaction ID: 71010.E2318 Date of Disbursement 08 / 21 / 2007
Mailing Address 101 Constitution Ave NW		Amount of Each Disbursement this Period 178.50
City Washington State DC Zip Code 20001-2133	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Transaction ID: 71010.E2320 Date of Disbursement 08 / 21 / 2007
Mailing Address Hartsfield Intl Airport		Amount of Each Disbursement this Period 300.00
City Atlanta State GA Zip Code 30309-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRAVEL EXPENSE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ruths Chris</b>		Transaction ID: 71010.E2319 Date of Disbursement 08 / 21 / 2007
Mailing Address 2231 Crystal Drive, #11		Amount of Each Disbursement this Period 426.18
City Arlington State VA Zip Code 22202-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. U.S. Postal Service</b>		Transaction ID: 71010.E2322 Date of Disbursement 08 / 21 / 2007
Mailing Address 6545 Hwy. 54		Amount of Each Disbursement this Period 482.00
City Sharpsburg State GA Zip Code 30277-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bank of Coweta</b>		Transaction ID: 71010.E2343 Date of Disbursement 09 / 24 / 2007
Mailing Address Attn: Ann Hand P.O. Box 1218		Amount of Each Disbursement this Period 1426.39
City Newnan State GA Zip Code 30264-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW	Candidate Name	SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Atlanta Cellular Services</b>		Transaction ID: 71010.E2345 Date of Disbursement 09 / 24 / 2007
Mailing Address 3636 Dallas Hwy SW Ste 302		Amount of Each Disbursement this Period 297.80
City Marietta State GA Zip Code 30064-5918	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CELL PHONE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1426.39
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Capital Grille</b>		Transaction ID: 71010.E2347 Date of Disbursement 09 / 24 / 2007
Mailing Address 601 Pennsylvania Avenue, NW.		Amount of Each Disbursement this Period 305.18
City Washington State DC Zip Code 20004-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE Candidate Name	Category/Type	<b>[MEMO ITEM]</b> MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CrystalTech Web Hosting</b>		Transaction ID: 71010.E2352 Date of Disbursement 09 / 24 / 2007
Mailing Address 1125 W Pinnacle Peak Rd Ste 103 Suite 103		Amount of Each Disbursement this Period 26.95
City Phoenix State AZ Zip Code 85027-1368	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement WEB HOSTING Candidate Name	Category/Type	<b>[MEMO ITEM]</b> MEMO: WEB HOSTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Office Depot</b>		Transaction ID: 71010.E2351 Date of Disbursement 09 / 24 / 2007
Mailing Address Augusta		Amount of Each Disbursement this Period 215.35
City Augusta State GA Zip Code 30909-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES Candidate Name	Category/Type	<b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	.....



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Sprayberrys BBQ</b>		Transaction ID: 71010.E2346 Date of Disbursement 09 / 24 / 2007
Mailing Address Bullsboro Road		Amount of Each Disbursement this Period 56.40
City Newnan State GA Zip Code 30265-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. U.S. Postal Service</b>		Transaction ID: 71010.E2348 Date of Disbursement 09 / 24 / 2007
Mailing Address 6545 Hwy. 54		Amount of Each Disbursement this Period 143.50
City Sharpsburg State GA Zip Code 30277-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Transaction ID: 71010.E2350 Date of Disbursement 09 / 24 / 2007
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 38.94
City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CELL PHONE	Candidate Name	<b>[MEMO ITEM]</b> MEMO: CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Merchant Bankcard</b>		<b>Transaction ID:</b> 70910.E2299 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 7
Mailing Address 5701 Lindero Canyon Rd., #3		Amount of Each Disbursement this Period 30.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Thousand Oaks State CA Zip Code 91362-	Purpose of Disbursement TRANSACTION FEES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>TRANSACTION FEES</b>

Full Name (Last, First, Middle Initial) <b>B. Merchant Bankcard</b>		<b>Transaction ID:</b> 71010.E2324 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7
Mailing Address 5701 Lindero Canyon Rd., #3		Amount of Each Disbursement this Period 30.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Thousand Oaks State CA Zip Code 91362-	Purpose of Disbursement TRANSACTION FEES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>TRANSACTION FEES</b>

Full Name (Last, First, Middle Initial) <b>C. Merchant Bankcard</b>		<b>Transaction ID:</b> 71010.E2364 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 7
Mailing Address 5701 Lindero Canyon Rd., #3		Amount of Each Disbursement this Period 81.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Thousand Oaks State CA Zip Code 91362-	Purpose of Disbursement TRANSACTION FEES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>TRANSACTION FEES</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	141.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Bellwether Consulting Group</b>		Transaction ID: 70709.E2222 Date of Disbursement 07 / 03 / 2007	
Mailing Address 1775 Eye St. NW Suite 700		Amount of Each Disbursement this Period 1935.06	
City Washington State DC Zip Code 20006-	Purpose of Disbursement FUNDRAISING CONSULTING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	FUNDRAISING CONSULTING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Bellwether Consulting Group</b>		Transaction ID: 70910.E2253 Date of Disbursement 07 / 25 / 2007	
Mailing Address 1775 Eye St. NW Suite 700		Amount of Each Disbursement this Period 136.56	
City Washington State DC Zip Code 20006-	Purpose of Disbursement FUNDRAISING CONSULTING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	FUNDRAISING CONSULTING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Bellwether Consulting Group</b>		Transaction ID: 70910.E2260 Date of Disbursement 08 / 03 / 2007	
Mailing Address 1775 Eye St. NW Suite 700		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20006-	Purpose of Disbursement FUNDRAISING CONSULTING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	FUNDRAISING CONSULTING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3071.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Bellwether Consulting Group</b>		Transaction ID: 70910.E2262 Date of Disbursement 08 / 07 / 2007
Mailing Address 1775 Eye St. NW Suite 700		Amount of Each Disbursement this Period 600.00
City Washington State DC Zip Code 20006-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name		FUNDRAISING CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bellwether Consulting Group</b>		Transaction ID: 71010.E2306 Date of Disbursement 08 / 16 / 2007
Mailing Address 1775 Eye St. NW Suite 700		Amount of Each Disbursement this Period 20.00
City Washington State DC Zip Code 20006-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name		FUNDRAISING CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Bellwether Consulting Group</b>		Transaction ID: 71010.E2307 Date of Disbursement 08 / 21 / 2007
Mailing Address 1775 Eye St. NW Suite 700		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20006-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name		FUNDRAISING CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1620.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Bellwether Consulting Group</b>		<b>Transaction ID:</b> 71010.E2337 Date of Disbursement 09 / 24 / 2007
Mailing Address 1775 Eye St. NW Suite 700		Amount of Each Disbursement this Period 812.00
City Washington State DC Zip Code 20006-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING CONSULTING	Candidate Name	FUNDRAISING CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		<b>Transaction ID:</b> 70910.E2251 Date of Disbursement 07 / 13 / 2007
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 197.63
City Washington State DC Zip Code 20003-1801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Capitol Hill Club</b>		<b>Transaction ID:</b> 71010.E2312 Date of Disbursement 08 / 22 / 2007
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 105.14
City Washington State DC Zip Code 20003-1801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1114.77
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		<b>Transaction ID:</b> 71010.E2355 <b>Date of Disbursement</b> 09 / 26 / 2007
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 38.63
City Washington State DC Zip Code 20003-1801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Globe Telecommunications</b>		<b>Transaction ID:</b> 70709.E2221 <b>Date of Disbursement</b> 07 / 03 / 2007
Mailing Address 30 S. Court Square		Amount of Each Disbursement this Period 119.33
City Newnan State GA Zip Code 30263-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE	Candidate Name	TELEPHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Globe Telecommunications</b>		<b>Transaction ID:</b> 70910.E2263 <b>Date of Disbursement</b> 08 / 07 / 2007
Mailing Address 30 S. Court Square		Amount of Each Disbursement this Period 115.13
City Newnan State GA Zip Code 30263-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE	Candidate Name	TELEPHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	273.09
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Globe Telecommunications</b>		<b>Transaction ID:</b> 71010.E2313 <b>Date of Disbursement</b> 08 / 28 / 2007
Mailing Address 30 S. Court Square		Amount of Each Disbursement this Period 115.21
City Newnan State GA Zip Code 30263-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE Candidate Name	Category/Type	TELEPHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. GR Seppala &amp; Associates</b>		<b>Transaction ID:</b> 70910.E2259 <b>Date of Disbursement</b> 08 / 03 / 2007
Mailing Address 1161 Wayzata Blvd E Box 219		Amount of Each Disbursement this Period 957.60
City Wayzata State MN Zip Code 55391-1935	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW Candidate Name	Category/Type	SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		<b>Transaction ID:</b> 71012.E2372 <b>Date of Disbursement</b> 08 / 03 / 2007
Mailing Address Hartsfield Intl Airport		Amount of Each Disbursement this Period 957.60
City Atlanta State GA Zip Code 30309-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement AIRFARE Candidate Name	Category/Type	<b>[MEMO ITEM]</b> MEMO: AIRFARE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1072.81</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. GR Seppala &amp; Associates</b>		<b>Transaction ID: 71010.E2338</b> Date of Disbursement 09 / 24 / 2007
Mailing Address 1161 Wayzata Blvd E Box 219		Amount of Each Disbursement this Period 166.00
City Wayzata State MN Zip Code 55391-1935	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRAVEL EXPENSES	Candidate Name	TRAVEL EXPENSES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Chip Lake</b>		<b>Transaction ID: 71010.E2361</b> Date of Disbursement 09 / 28 / 2007
Mailing Address 769 Nob Ridge Drive		Amount of Each Disbursement this Period 750.00
City Marietta State GA Zip Code 30064-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY	Candidate Name	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. National Mail</b>		<b>Transaction ID: 71010.E2342</b> Date of Disbursement 09 / 24 / 2007
Mailing Address 2299 White St		Amount of Each Disbursement this Period 404.36
City Houston State TX Zip Code 77007-2814	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DIRECT MAIL	Candidate Name	DIRECT MAIL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1320.36
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Phoenix Printers</b>		<b>Transaction ID:</b> 71010.E2340 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 24 / 2007
Mailing Address 4115 Wisconsin Avenue, NW., Ste. 1		Amount of Each Disbursement this Period 569.24
City Washington State DC Zip Code 20016-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PRINTING	Candidate Name	PRINTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Phoenix Printers</b>		<b>Transaction ID:</b> 71010.E2341 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 24 / 2007
Mailing Address 4115 Wisconsin Avenue, NW., Ste. 1		Amount of Each Disbursement this Period 381.99
City Washington State DC Zip Code 20016-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PRINTING	Candidate Name	PRINTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Professional Data Services</b>		<b>Transaction ID:</b> 70910.E2257 <b>Date of Disbursement</b> MM / DD / YYYY 07 / 27 / 2007
Mailing Address 337 S Milledge Ave Ste 101		Amount of Each Disbursement this Period 1500.00
City Athens State GA Zip Code 30605-1083	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement COMPLIANCE CONSULTING	Candidate Name	COMPLIANCE CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2451.23
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<b>A. Professional Data Services</b> Full Name (Last, First, Middle Initial) Mailing Address 337 S Milledge Ave Ste 101 City Athens State GA Zip Code 30605-1083 Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 71010.E2315</b> Date of Disbursement 09 / 03 / 2007 Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>COMPLIANCE CONSULTING</b>
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<b>B. RC Development</b> Full Name (Last, First, Middle Initial) Mailing Address 2753 East Hwy 34 Suite 2 City Newnan State GA Zip Code 30265- Purpose of Disbursement RENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 71010.E2310</b> Date of Disbursement 08 / 16 / 2007 Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>RENT</b>
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<b>C. The Stoneridge Group</b> Full Name (Last, First, Middle Initial) Mailing Address 13010 Morris Road Sixth Floor City Alpharetta State GA Zip Code 30004- Purpose of Disbursement DIRECT MAIL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 71010.E2339</b> Date of Disbursement 09 / 24 / 2007 Amount of Each Disbursement this Period 1461.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>DIRECT MAIL</b>
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4461.60</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		<b>Transaction ID:</b> 70709.E2223 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 130.37
City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CELL PHONE	Candidate Name	CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		<b>Transaction ID:</b> 70910.E2255 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 7
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 138.43
City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CELL PHONE	Candidate Name	CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		<b>Transaction ID:</b> 70910.E2261 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 327.90
City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CELL PHONE	Candidate Name	CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	596.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Transaction ID: 71010.E2308 Date of Disbursement 08 / 16 / 2007
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 174.03
City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CELL PHONE	Candidate Name	CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Transaction ID: 71010.E2309 Date of Disbursement 08 / 28 / 2007
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 88.57
City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CELL PHONE	Candidate Name	CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Transaction ID: 71010.E2336 Date of Disbursement 09 / 24 / 2007
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 163.92
City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CELL PHONE	Candidate Name	CELL PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	426.52
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

<b>A. Joan Westmoreland</b> Full Name (Last, First, Middle Initial) Mailing Address 25 Bretts Bend City Sharpsburg State GA Zip Code 30277- Purpose of Disbursement SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 71010.E2356</b> Date of Disbursement 09 / 26 / 2007 Amount of Each Disbursement this Period 507.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW
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<b>B. Amtrak</b> Full Name (Last, First, Middle Initial) Mailing Address Union Station City Washington State DC Zip Code 20001- Purpose of Disbursement TRAIN TICKET Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 71012.E2373</b> Date of Disbursement 09 / 26 / 2007 Amount of Each Disbursement this Period 507.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: TRAIN TICKET
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<b>C. Joan Westmoreland</b> Full Name (Last, First, Middle Initial) Mailing Address 25 Bretts Bend City Sharpsburg State GA Zip Code 30277- Purpose of Disbursement FR FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 71010.E2357</b> Date of Disbursement 09 / 26 / 2007 Amount of Each Disbursement this Period 302.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FR FEES
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	809.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Willis Consulting</b>		<b>Transaction ID:</b> 70709.E2224 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
Mailing Address 3126 Bransford Road		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Augusta State GA Zip Code 30909-	Category/Type <input type="checkbox"/>	
Purpose of Disbursement FUNDRAISING CONSULTING		FUNDRAISING CONSULTING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Willis Consulting</b>		<b>Transaction ID:</b> 70910.E2256 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 7
Mailing Address 3126 Bransford Road		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Augusta State GA Zip Code 30909-	Category/Type <input type="checkbox"/>	
Purpose of Disbursement FUNDRAISING CONSULTING		FUNDRAISING CONSULTING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Willis Consulting</b>		<b>Transaction ID:</b> 71010.E2317 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 7
Mailing Address 3126 Bransford Road		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Augusta State GA Zip Code 30909-	Category/Type <input type="checkbox"/>	
Purpose of Disbursement FUNDRAISING CONSULTING		FUNDRAISING CONSULTING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial)

**A.** Willis Consulting

Mailing Address 3126 Bransford Road

City Augusta State GA Zip Code 30909-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 71010.E2344

Date of Disbursement

09 / 24 / 2007

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

34197.81

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input checked="" type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. National Republican Congressional Comm.</b>		<b>Transaction ID:</b> 71010.E2332
Mailing Address 320 First Street SE		Date of Disbursement 09 / 19 / 2007
City Washington	State DC	Zip Code 20002-
Purpose of Disbursement TRANSFER OF EXCESS CAMPAIGN FUNDS		Amount of Each Disbursement this Period 10000.00
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. National Republican Congressional Comm.</b>		<b>Transaction ID:</b> 71010.E2333
Mailing Address 320 First Street SE		Date of Disbursement 09 / 19 / 2007
City Washington	State DC	Zip Code 20002-
Purpose of Disbursement TRANSFER OF EXCESS CAMPAIGN FUNDS		Amount of Each Disbursement this Period 15000.00
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>25000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>25000.00</b>



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial) <b>A. Georgians For Karen Handel</b>		Transaction ID: 70910.E2264 Date of Disbursement 08 / 07 / 2007
Mailing Address PO Box 1310		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30301-1310	Purpose of Disbursement CONTRIBUTION Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jeb Bradley for Congress</b>		Transaction ID: 71010.E2358 Date of Disbursement 09 / 28 / 2007
Mailing Address 645 S Main St		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Wolfeboro State NH Zip Code 03894-4419	Purpose of Disbursement Candidate Name JOSEPH E MR III BRADLEY Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Walberg for Congress</b>		Transaction ID: 71010.E2362 Date of Disbursement 09 / 28 / 2007
Mailing Address 6769 Teachout Rd		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tipton State MI Zip Code 49287-9807	Purpose of Disbursement Candidate Name TIMOTHY L WALBERG Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Westmoreland for Congress

Full Name (Last, First, Middle Initial)

**A.** YR Dominion PAC

Mailing Address 4913 Preakness Way

City Virginia Beach State VA Zip Code 23464-3027

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 71010.E2359

Date of Disbursement

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
0	9		2	8		2	0	0	7

Amount of Each Disbursement this Period

250.00
--------

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**250.00**

**TOTAL** This Period (last page this line number only) .....

**3250.00**